



Derbyshire County Council

ANNUAL REPORT

OF THE

COUNTY MEDICAL OFFICER OF HEALTH

For the Year 1970

A. H. SNAITH

M.D., F.R.C.Path., D.P.H.

COUNTY MEDICAL OFFICER OF HEALTH

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HEALTH COMMITTEE

(December, 1970)

ALDERMAN W. E. GARDNER
(Chairman)

ALDERMAN W. W. JOHNSON
(Vice-Chairman)

Aldermen

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J. CARTER
Mrs. J. B. HARTLEY

H. PIPES
J. W. TRIPPETT

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S. F. COLLINS
A. HARRIS
G. HARRIS
R. A. MIDDLETON

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W. POTTS
MRS. H. A. B. PULVERTAFT
V. H. SCHOFIELD
MRS. J. M. TUDOR
MRS. M. H. WESTLAKE

Co-opted Members

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Mrs. P. RITSON

DR. R. W. STEWART
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Co-opted Members

CHAIRMAN OF CHESTERFIELD BOROUGH HEALTH AND LICENSING COMMITTEE
(ALDERMAN J. L. HADFIELD) and DR. W. J. BARBOUR.

Co-opted Members in an Advisory Capacity

CONSULTANT PSYCHIATRISTS FROM: THE PASTURES HOSPITAL, THE CHESTERFIELD AREA AND ST. THOMAS'S HOSPITAL, STOCKPORT.

PUBLIC PROTECTION COMMITTEE

(December, 1970)

ALDERMAN H. CAWDRON
(Chairman)

COUNCILLOR H. R. GILL
(Vice-Chairman)

Councillors

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G. CUTTS
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Mrs. M. H. A. EMMAS-WILLIAMS

R. H. LEWIS
A. C. RILEY
W. A. STRETTON
J. WILLIAMSON

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6th September, 1971.

*To the Chairman and Members of the
Derbyshire County Council.*

This is the 81st Annual Report on the health of the County of Derby. During the greater part of 1970 Dr. J. B. S. Morgan was County Medical Officer of Health and it is a great pleasure for me to have the opportunity of thanking him for his several kindnesses when I came to Derbyshire. As he was responsible for the bulk of the work to which reference is made in this report its content is similar to that in previous years, but the opportunity has been taken to re-organise it in certain respects and it has been shortened. The importance of the annual reports of medical officers of health up and down the country over the last century has been chiefly that they provided a vehicle for comments about the nation's health and drew attention to the need for changes and improvements. It is to be hoped that the community physician of the future will be required to publish reports and that the unification of the National Health Service will not bring about a situation in which there will be no doctor who can make constructive suggestions or voice criticisms about the medical services with the authority that an official publication commands.

The most important single event for the public health department in 1970 was undoubtedly the Local Authority Social Services Act, 1970. This required the Authority to establish a Social Services Committee and specified its functions, which included those previously exercised by the Health Committee for the mental health and home help services and for the supervision of day nurseries and child minding. At the same time the Education (Handicapped Children) Act, 1970, transferred the junior training centres to the Education Committee. The effect of these Acts was to take social work from the Health Committee and although much opposition to these measures has been attributed to the medical profession in general and to medical officers of health in particular (more so than in fact has been expressed) there are powerful arguments in favour of the separation of the medical and social services. They have different roots, the one in the biological sciences, the other in the economic and political sciences, and are likely to develop more quickly if they are unimpeded administratively by each other. Moreover, a better appraisal will be possible of what each has to offer to society if they are seen to be distinct. It was encouraging to come to Derbyshire and find the new "Seebom" teams already in operation and giving every indication that co-operation between the health and social services in the field will not be a problem.

It will be seen from page 15 that some 20,000 children or 41 % of those under the age of 5 (including 77 % of those under the age of 1) attended child health clinics during the course of the year. Considerable development has taken place during the last decade in the techniques of examining young children for abnormalities, particularly of the special senses—vision and hearing—and of the central nervous system. The organisation of these services should be such that no handicapped child is overlooked, and therefore neglected, once it becomes technically possible to make the appropriate diagnosis. Disabilities at this age are extremely difficult to remedy, medically and even more so, educationally. On page 16 it will be seen that 117 children were notified to the Department of Health as having congenital abnormalities. It should be borne in mind that this figure refers only to those children whose defects were observable at birth and by external examination. The majority of defects are much more subtle and emerge only over a considerable period of time. For this reason they are not obvious to parents who have no reason to suppose that their child is other than perfectly healthy.

In all there were 306 nurses on the staff and of these about half were attached to general practitioners. Nursing is perhaps the most important single element in the National Health Service and the community nursing services have a special importance because they determine to a large extent whether patients can be cared for in the community rather than in hospital. Community nursing offers a more attractive career to many women, whether married or single, than working in a hospital. (The possibility of reducing the distinction between the two, so that a nurse can work both in hospital and in the community, merits further exploration.) The Mayston Report, 1969, recommended that every health authority should appoint a chief nursing officer and review the management of its nursing services. At its October meeting the Health Committee resolved that the department's nursing services be reorganised on the basis of an area pattern of management and also recommended that a chief nursing officer be appointed.

At the end of the year the Health Committee approved a revised scheme with the Family Planning Association, to take effect from April 1971. The scheme provides for a professionally based service giving full consultation and free supplies to medical and social cases, simply on the recommendation (and without further enquiry) of any Derbyshire doctor or member of the County Council's medical, nursing or social worker staff or the Family Planning Association's professional staff. The efficiency of this service will be kept under close review so that appropriate steps can be taken to make any suitable amendments at as early a stage as possible. Increased financial provision was also made and it is to be hoped that all those professionally concerned with this service will use it to the full.

Derbyshire's first health centre, at Shirebrook, opened in October, and from the beginning the general medical and dental practitioners' services and those of the Health Committee worked

well together. All the doctors have attached nursing staff, so that an integrated medical and nursing team provides for the area, while shared receptionist services were established from the outset, the County Council providing half the salary of the most senior secretary employed at the Centre.

The growth of group practice and the construction of purpose-built premises, whether privately or through health centres, is only one manifestation—possibly not the most important—of changes that are taking place in the community medical services. Others are the appearance of post-graduate medical centres, closer professional links with consultants and hospital staff and the participation of more general practitioners in the work of the hospitals. Prominent in much of the discussion that is taking place in connection with the forthcoming reorganisation of the National Health Service is the need to provide opportunities for general practitioners to participate not only in hospital work, but in the whole range of community preventive clinical services as well. The development of medical and nursing teams operating from appropriate accommodation is a contribution to changes of this kind insofar as it facilitates reorganisation of the work of the general practitioner and enables him to extend his services in the interest of patients as a whole.

An important development in 1970 was the introduction of vaccination against rubella (german measles). For long this was thought to be a trivial childhood condition until it was found that many women who suffered an attack of rubella during pregnancy gave birth to babies with very severe congenital abnormalities of the heart and other organs. In some countries efforts were made to overcome the problem by attempting to arrange for girls to catch the infection while they were in childhood. Such a technique could not be epidemiologically effective, because it could not ensure that sufficient children were protected to reduce effectively the number of congenital malformations for which rubella was responsible. The development of adequately safe rubella immunisation promises to transform the situation. This year the Health Committee was able to arrange for rubella vaccination to be offered to all girls aged 13, but in future the programme will be extended to include all girls between the ages of 11 and 13.

Dr. Harris resigned her post at the end of the year to go into general practice in Chesterfield. I should like to thank her for the service she gave to the Department and to wish her well for the future.

Alderman W. E. Gardner resigned as Chairman of the Health Committee, having served on the Committee for nine years, $3\frac{1}{2}$ of them in the Chair. Alderman Gardner's contribution to the community health services in Derbyshire was a very substantial one, particularly in the field of mental health and happily, as Chairman of the Social Services Committee, his association with Derbyshire's health services will continue. I should like to welcome Alderman Mrs. J. B. Hartley who takes his place as the new Chairman of the Health Committee and who presided at the last meeting of the year, on December 29th.

I should like to thank Mr. E. W. Dilks and the senior administrative staff for the work they have had to undertake in compiling this report during a period of considerable change within the office. Finally, I should like to express my very real gratitude to Dr. P. K. Sylvester for the unreserved support he has given me in every facet of the Department's work.

A. H. SNAITH,
County Medical Officer of Health.

PART I—GENERAL STATISTICS

Area, Population and Rateable Value

The administrative county of Derby comprises twenty-nine sanitary districts, four of which are municipal boroughs, sixteen urban districts and nine rural districts.

The county has an area of 619,002 acres, 98,074 in municipal boroughs and urban districts and 520,928 in rural districts.

The population of the administrative county as estimated by the Registrar-General at the middle of 1970 was as follows:-

Municipal Boroughs	148,920
Urban Districts	239,960
Rural Districts.. .. .	282,660
<hr/>	
Total administrative county ..	671,540

The rateable value on 1st April, 1970, was £23,923,048, and the product of a new penny rate, £230,306.

Vital Statistics

	<i>Males</i>	<i>Females</i>	<i>Total</i>
Live births—legitimate	4,956	4,686	9,642
—illegitimate	339	311	650
<hr/>			
Total	5,295	4,997	10,292
<hr/>			
		<i>Derbyshire</i>	<i>Rates for England & Wales</i>
Live birth rate per 1,000 population ..		15.6	16.0
Illegitimate live births per cent of total live births		6	8
Stillbirths—Number		135	
—Rate per 1,000 total live and still births		13	13
Total live- and still-births		10,427	
Infant deaths (deaths under one year) ..		171	
Infant mortality rates—			
Total infant deaths per 1,000 total live-births.. .. .		17	18
Legitimate infant deaths per 1,000 legitimate live-births		16	17
Illegitimate infant deaths per 1,000 illegitimate live-births		28	26

	<i>Derbyshire</i>	<i>Rates for England & Wales</i>
Neo-natal mortality rate (deaths under four weeks per 1,000 total live-births) ..	11	12
Early neo-natal mortality rate (deaths under one week per 1,000 total live-births) ..	10	11
Perinatal mortality rate (still-births and deaths under one week combined per 1,000 total live- and still-births).. ..	22	23
Maternal mortality (including abortion)—		
Number of deaths	2	
Rate per 1,000 total live- and still-births	0·19	0·18
Number of deaths from all causes	7,972	
Death rate per 1,000 of the estimated population	12·5	11·7
Deaths from cancer	1,444	
Death rate from cancer	2·15	2·39

Derbyshire compared with England and Wales

Year		Birth Rate per 1,000 population	Death Rate per 1,000 population	Infant Mortality Rate per 1,000 live births	Neonatal Mortality Rate per 1,000 live births	Stillbirths per 1,000 total live and still births	Maternal Mortality Rate per 1,000 total live and still births
1891	DERBYSHIRE	35.1	18.9	142	†	†	†
	England & Wales	31.4	20.2	149			
1900	DERBYSHIRE	32.18	16.65	152	†	†	†
	England & Wales	28.9	18.3	154			
1910	DERBYSHIRE	28.9	12.6	113	†	†	†
	England & Wales	24.8	13.4	106			
1920	DERBYSHIRE	27.31	11.67	83.16	†	†	†
	England & Wales	25.4	12.4	80.0			
1930	DERBYSHIRE	16.92	10.15	61.4	†	†	†
	England & Wales	16.3	11.4	60.0			
1940	DERBYSHIRE	15.54	12.24	55.43	†	†	†
	England & Wales	14.6	14.3	55.0			
1950	DERBYSHIRE	15.78	11.3	30.19	†	†	†
	England & Wales	15.8	11.6	29.8			
1960	DERBYSHIRE	16.21	12.11	19.74	13.54	22.64	0.33
	England & Wales	17.1	11.5	21.9	15.6	19.8	0.4
1965	DERBYSHIRE	17.31	11.68	17.20	11.25	15.88	0.07
	England & Wales	18.1	11.5	19.0	13.0	15.8	0.3
1969	DERBYSHIRE	15.9	12.5	18	11	14	0.19
	England & Wales	16.3	11.9	18	12	13.2	0.2
1970	DERBYSHIRE	15.6	12.5	17	11	13	0.19
	England & Wales	16.0	11.7	18	12	13	0.18

Since 1954 the rates for the administrative county have been adjusted for age and sex and are, therefore, comparable with those for England and Wales.

† Figures not available.

Information relating to Sanitary Districts —

SANITARY DISTRICTS	MEDICAL OFFICER OF HEALTH	Areas in Acres (Land and Water)
(URBAN)		
ALFRETON .. ..	.. P. Weyman, L.R.C.P., L.R.C.S., L.R.F.P. & S., D.P.H.	5,172
ASHBOURNE .. ..	.. W. J. Morrissey, M.B., B.Ch., B.A.O., D.P.H.	1,070
BAKEWELL .. ..	.. H. G. Watson, M.B., Ch.B. ..	3,061
BELPER .. ..	.. W. J. Morrissey, M.B., B.Ch., B.A.O., D.P.H.	4,293
BOLSOVER .. ..	.. M. J. Cash, M.R.C.S., L.R.C.P., D.P.H.	4,528
BUXTON (Borough) ..	.. H. E. Nutton, M.B., Ch.B., D.P.H. ..	6,338
CHESTERFIELD (Borough)	.. H. Bailey, M.B., Ch.B., D.P.H. ..	8,477
CLAY CROSS .. ..	.. D. P. Adams, M.B., Ch.B., D.P.H. ..	2,348
DRONFIELD .. ..	.. D. P. Adams, M.B., Ch.B., D.P.H. ..	3,457
GLOSSOP (Borough) ..	.. Vacant	3,323
HEANOR .. ..	.. P. Weyman, L.R.C.P., L.R.C.S., L.R.F.P. & S., D.P.H.	4,420
ILKESTON (Borough) ..	.. P. Weyman, L.R.C.P., L.R.C.S., L.R.F.P. & S., D.P.H.	3,018
LONG EATON .. ..	.. C. G. Woolgrove, M.B., Ch.B., D.P.H.	3,559
MATLOCK .. ..	.. Vacant	16,598
NEW MILLS .. ..	.. Vacant	5,244
RIPLEY .. ..	.. P. Weyman, L.R.C.P., L.R.C.S., L.R.F.P. & S., D.P.H.	5,414
STAVELEY .. ..	.. D. P. Adams, M.B., Ch.B., D.P.H. ..	6,504
SWADLINCOTE .. ..	.. A. F. Crowley, M.B., B.Ch., B.A.O., D.R.C.O.G., D.P.H.	3,760
WHALEY BRIDGE ...	.. H. E. Nutton, M.B., Ch.B., D.P.H. ..	3,479
WIRKSWORTH .. ..	.. W. J. Morrissey, M.B., B.Ch., B.A.O., D.P.H.	4,011
TOTALS OF URBAN DISTRICTS ..		98,074
(RURAL)		
ASHBOURNE .. ..	.. W. J. Morrissey, M.B., B.Ch., B.A.O., D.P.H.	86,188
BAKEWELL .. ..	.. H. G. Watson, M.B., Ch.B. ..	85,644
BELPER .. ..	.. W. J. Morrissey, M.B., B.Ch., B.A.O., D.P.H.	46,277
BLACKWELL .. ..	.. M. J. Cash, M.R.C.S., L.R.C.P., D.P.H.	21,666
CHAPEL-EN-LE-FRITH ..	.. H. E. Nutton, M.B., Ch.B., D.P.H. ..	103,391
CHESTERFIELD .. ..	.. D. P. Adams, M.B., Ch.B., D.P.H. ..	63,908
CLOWNE .. ..	.. M. J. Cash, M.R.C.S., L.R.C.P., D.P.H.	13,424
REPTON .. ..	.. A. F. Crowley, M.B., B.Ch., B.A.O., D.R.C.O.G., D.P.H.	64,237
S. E. DERBYSHIRE ..	.. C. G. Woolgrove, M.B., Ch.B., D.P.H.	36,193
TOTALS OF RURAL DISTRICTS ..		520,928
TOTALS OF URBAN DISTRICTS ..		98,074
TOTALS OF WHOLE COUNTY ..		619,002

* Adjusted to make allowance for sex

Year ended 31st December, 1970.

POPULATION		Births (Live)	Deaths	Rate per 1,000 of Estimated Population*		Infant Death Rate per 1,000 Births	Comparability Factors	
Census 1961	Esti- mated Mid- 1970			Birth Rate	Death Rate		for Births	for Deaths
22,999	22,270	308	272	14.6	13.8	16	1.06	1.13
5,680	5,620	91	95	17.8	11.8	22	1.10	0.70
4,170	4,130	38	75	9.9	10.6	53	1.08	0.58
16,360	16,330	259	262	16.9	11.8	12	1.06	0.74
11,770	11,690	153	142	12.4	15.1	26	0.95	1.25
20,100	20,000	292	299	15.3	13.2	24	1.05	0.88
70,420	70,000	1,072	907	15.6	13.1	21	1.02	1.01
9,880	9,890	158	125	16.8	14.7	38	1.05	1.17
15,880	16,500	375	114	17.3	9.9	11	0.76	1.43
21,830	23,750	469	297	21.5	11.1	17	1.09	0.89
24,470	24,430	409	290	17.5	13.7	10	1.05	1.15
35,400	35,170	544	399	15.7	13.8	13	1.01	1.22
33,170	33,180	575	348	17.1	11.6	33	0.99	1.10
20,240	20,130	279	239	14.0	12.5	7	1.01	1.05
8,880	8,950	179	122	21.4	12.8	—	1.07	0.94
17,910	17,870	241	231	14.4	13.7	29	1.07	1.06
18,480	18,430	278	217	15.3	14.5	22	1.01	1.23
20,130	20,190	327	229	17.3	12.3	15	1.07	1.09
5,390	5,340	58	75	12.6	14.0	17	1.16	1.00
5,040	5,010	91	46	18.0	10.5	11	0.99	1.14
387,640	388,880	6,196	4,784	16.2	12.8	19	1.02	1.04
11,890	11,970	159	128	14.9	11.7	25	1.12	1.09
18,760	18,770	247	247	14.4	11.5	20	1.09	0.87
23,770	23,690	312	278	14.1	11.7	13	1.07	1.00
44,240	44,020	718	500	16.3	13.9	17	1.00	1.22
18,350	18,270	277	232	16.9	11.2	7	1.11	0.88
73,700	73,390	994	719	12.7	12.6	15	0.94	1.29
19,730	19,550	313	256	16.3	14.1	13	1.02	1.08
33,240	33,410	485	392	15.4	10.5	10	1.06	0.90
39,010	39,590	591	436	14.8	10.9	8	0.99	0.99
282,690	282,660	4,096	3,188	14.6	12.1	14	1.01	1.07
387,640	388,880	6,196	4,784	16.2	12.8	19	1.02	1.04
670,330	671,540	10,292	7,972	15.6	12.5	17	1.02	1.05

and age of population, etc.

Table of deaths during the year 1970 in each of the Sanitary Districts, classified according to diseases.

CAUSES OF DEATH	URBAN DISTRICTS														RURAL DISTRICTS										GRAND TOTALS																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																									
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	ALFRETON	ASHBOURNE	BAKEWELL	BELPER	BOLSOVER	BUXTON Borough	CHESTERFIELD Bor.	CLAY CROSS	DRONFIELD	GLOSSOP Borough	HEANOR	ILKESTON Borough	LONG Eaton	MATLOCK	New Mills	RIPLEY	STAVELEY	SWADLINCOTE	WHALEY BRIDGE	WIRKSWORTH	TOTAL—Urbans	ASHBOURNE	BAKEWELL	BELPER		BLACKWELL	CHAPEL-EN-LE-FRITH	CHESTERFIELD	CLOWNE	REPTON	S.E. DERBYSHIRE	TOTAL—Rurals																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																		
Cholera

PART II—CARE OF MOTHERS AND YOUNG CHILDREN

Ante-natal care

During the year, 874 sessions were held at 26 clinics. All were conducted by County Council medical staff, except one which was attended by a consultant obstetrician provided by the Regional Hospital Board. One or more of the authority's midwives and a health visitor are present at each clinic. (Owing to lack of demand, no ante-natal sessions were held at the Buxton, Hope or Swadlincote clinics.) The number of women who attended for ante-natal examinations was 1,180, and 113 attended for post-natal examination.

A routine medical examination is carried out at the patient's first visit to the clinic and any abnormalities detected are referred to the patient's general medical practitioner, or, with his approval, to an appropriate hospital consultant. Arrangements are made for the collection of blood from all patients, so that A.B.O. group typing and Rh. typing, as well as tests for syphilis, may be performed. Haemoglobin estimations are also made. Ferrous fumarate and ferrous gluconate tablets are available at the clinics, and patients not responding to these are referred to their own doctor for alternative treatment. Midwives are asked to visit any patient requiring close observation during the interval between her attendances at the clinic. All these facilities are available to both married and unmarried mothers.

Ante-natal records

Each patient attending the clinic receives a standard co-operation card on which is recorded a copy of the findings at each examination. The patient keeps this card in an envelope together with particulars of her blood group. She is instructed to bring this envelope with her when attending for ante-natal examination whether at the general practitioner's surgery or at hospital.

Supervision

The importance of regular ante-natal care is impressed on all patients attending the ante-natal clinics. They are asked to attend every month up to the 30th week, every fortnight from 30th-36th week and every week, where possible, from the 36th-40th week. It is, however, difficult to evolve a "pattern of supervision" as many patients transfer to hospital ante-natal care if and when their application for a hospital bed is accepted.

Mothercraft and relaxation classes

Mothercraft and relaxation classes are held as needed at all the main clinics. Usually they are conducted by the health visitor for the area, and one or more midwives who have received special training in the technique of correct breathing, exercise and relaxation in pregnancy and childbirth.

Number of women who attended during 1970 ..	2,012
Total number of attendances	9,132

Arrangements for selecting women whose confinement in hospital is recommended on medical or social grounds

The provision of hospital accommodation for maternity cases is the responsibility of Regional Hospital Boards. To facilitate the administrative arrangements concerning the large number of patients desiring hospital or maternity home accommodation, bed bureaux have been set up at Chesterfield and Derby by the Sheffield Regional Hospital Board. Forms of application for admission are available at the authority's ante-natal clinics, and these are passed to the appropriate bed bureau. Kings Mill Hospital, Mansfield, has also agreed to allocate six beds per month to patients living on the eastern fringe of the county.

Where admission to a hospital bed is recommended on medical grounds, this is usually sufficient to ensure that a bed is made available. In most cases, however, applications are based on social need, and such cases are referred to this authority for a report by a domiciliary midwife on the home circumstances.

Child health clinics

During 1970, one new child health clinic was opened, making a total of 105. The number of sessions and attendances at the child health clinics during 1970 are set out below:-

Half-day sessions	..	..	..	..	5,852
Number of children who attended during the year and were born in:					
1970	..	..	..	..	7,761
1969	..	..	..	..	7,217
1965-1968	..	..	..	..	7,096
Total number of children who attended during the year	..	..	..	..	22,074

Care of premature infants

Local health authorities are required by the Department of Health and Social Security to provide statistics about premature babies (i.e. those weighing $5\frac{1}{2}$ lbs. or less at birth). They relate to hospital births as well as domiciliary and nursing home births, thus constituting a complete record of the occurrence of each premature birth (live and still) and of the survival of premature infants in the area of the local health authority. The figures for 1970 are as follows:-

Number of premature live births notified (as adjusted by transfer notifications):-

(a) In hospital	..	..	..	595
(b) At home or in a nursing home	..	..	..	39
Total	..	..	..	634

Number of premature still-births notified (as adjusted by transfer notifications):-

(a) In hospital	73
(b) At home or in a nursing home	1
Total	74

Of the 595 premature babies who were born in hospital, 45 died within twenty-four hours of birth and 539 survived twenty-eight days. Of the 39 born at home or in a nursing home, 2 transferred to hospital on or before the twenty-eighth day; one died within twenty-four hours of birth, and 38 survived twenty-eight days.

Congenital abnormalities

During the year, 117 children have been notified to the Department of Health and Social Security as having congenital abnormalities. Of these 20 were still-born and 17 died in the first week of life. Classifying each case according to the major deformity present they fell into the following categories:-

Central nervous system ..	44
Eye, ear	1
Alimentary system ..	17
Heart and great vessels ..	5
Respiratory system ..	1
Uro-genital system ..	12
Limbs	25
Other skeletal	1
Other systems	6
Other malformations ..	5
Total	117

Since the notifications have been restricted to those defects diagnosed at birth, a high proportion are abnormalities of the central nervous system and of the limbs which are readily diagnosed in the new born infant. Some of the defects of the limbs, such as polydactyly and syndactyly, will not lead to any degree of handicap. The defects of the nervous system are frequently accompanied by other defects and the child will often be handicapped to some extent throughout life.

The hospitals, general medical practitioners and midwives have co-operated in supplying the information. Cases in which the diagnosis was doubtful have not been included.

Register of handicapped children

Records are kept of handicapped children, as well as those who are in groups thought to be "at risk" of developing handicapping conditions, including those discovered to have congenital abnormalities. During the year, 116 children born in 1970 were placed on the handicapped register.

Dental care of expectant and nursing mothers and pre-school children

Mr. H. E. Gray, the Chief Dental Officer, has provided the following report:-

The dental treatment that was given to pre-school children and expectant mothers was integrated with that for the school children and the amount of time spent on this work was the equivalent of 100 half day treatment sessions during which 745 attendances were made by 421 children and 84 by 28 mothers.

837 children were inspected and over half found to require attention. Treatment comprised fillings, extractions, preventive measures, gum treatment and fitting of dentures.

For both categories, the amount of conservative work was double the extraction work, children having 532 fillings and mothers 50. The extractions were nearly all done under general anaesthetics, of which there were 116 administrations.

These patients received attention as the result of:-

- (1) being referred from the child health and ante-natal clinics;
- (2) being referred by health visitors in the course of home visits;
- (3) inspections at the day and residential nurseries;
- (4) parents making requests for treatment;
- (5) children brought to the clinics for check-ups when older brothers and sisters were having courses of treatment.

Parents were interviewed, advice and dental health instruction given, supplemented with literature for home reference and the children received dental kits, consisting of a tooth brush, tooth paste and an attractively coloured beaker to encourage regular cleaning habits. Films of dental interest were included in the programme of film shows at the ante-natal clinics.

Welfare foods

The County Council has for many years supplied a limited number of proprietary preparations at ante-natal and child health clinics at approximately cost price. At the ante-natal clinics simple preparations of iron in tablet form (ferrous fumerate and ferrous gluconate) are prescribed by the medical staff in suitable cases.

National Dried Milk, vitamin A & D tablets, cod liver oil and orange juice, are distributed by the authority at 103 clinics, 54 local stores and 3 other centres. The following table shows the issues of national welfare foods during 1970:-

	<i>National Dried Milk (Packets)</i>	<i>Cod Liver Oil (Bottles)</i>	<i>Vitamin A. & D. (Packets)</i>	<i>Orange Juice (Bottles)</i>
Issued against coupons:-				
(a) for cash	14,549	—	—	—
(b) free	2,753	658	86	2,611
Issued to:-				
N.H.S. hospitals ..	565	—	—	85
Day nurseries	—	234	—	724
Issued at full price	16,390	6,956	12,906	167,409
Totals	34,257	7,848	12,992	170,829

Family planning clinics

During the year under review the County Council continued to make available at agreed times, without charge, the use of their clinics by the Family Planning Association, to which the Authority also made a fairly substantial financial contribution.

As mentioned in last year's annual report, the National Health Service (Family Planning) Act, 1967, confers on local health authorities a general power, with the approval of the Minister of Health (and, when the Minister directs, imposes a duty on them) to make arrangements for the giving of advice on contraception, the medical examination of persons seeking such advice, and the supply (by prescription or directly) of contraceptive substances and appliances. Ministry of Health circular 15/67 pointed out that the Act "extends the existing powers of local health authorities in order to enable them to provide (or arrange for other bodies to provide) advice on contraception and supplies for any persons who need them on social grounds and not (as hitherto) only in medical cases, i.e., for women likely to suffer detriment to their health as a result of pregnancy.

The County Council has, therefore, reviewed the matter, and has entered into an arrangement with the Family Planning Association with effect from April, 1971, under which women whose health might be expected to suffer because of increased mental, physical or social burdens placed upon them by pregnancy may obtain free family planning advice and supplies.

The intention is to provide a professionally based service so that medical or professional social workers are able in appropriate cases to arrange family planning services free, and without difficulty. The scheme, therefore, provides facilities for doctors, County Council health visitors, midwives, home nurses and social workers and the Family Planning Association's professional staff to refer medical or social cases to any of the 17 family planning clinics which are conveniently available, or for a domiciliary service.

The Family Planning Association's own arrangements under which a remission of charges may be made (in respect of both fees and supplies) on purely financial grounds will continue. No distinction is made between the married and the unmarried over the age of 16 years.

The arrangements have received the approval of the Derbyshire Local Medical Committee. The Senior Administrative Medical Officers of the Sheffield and Manchester Regional Hospital Boards were given details of the scheme, which they notified to the appropriate consultants. The arrangements were also publicised in the local press.

Nursery provision for children under five

Day nurseries

The authority's three day nurseries at Glossop, Ilkeston and Long Eaton, (providing respectively 50, 65 and 50 places) continued to operate satisfactorily during the year. The average daily attendance was 126, and at the end of the year the total number on the register was 172. The number of "priority" children on the waiting list was 36.

Student training

During the year under review ten students from the county day nurseries completed a two-year course of training and all but one were successful in gaining the Certificate of the National Nursery Examination Board.

Medical inspections

Each nursery is visited once a month by one of the authority's medical officers, all new admissions are examined and any other children who have been under recent medical treatment or about whom the mother wishes special advice. Regular attenders are examined about once every six months. It is thus possible to detect defects in their early stages and with the co-operation of the family doctor to secure early treatment. Special inspections are made in the case of infectious disease and the nurseries are also visited from time to time by medical members of the central office staff and the Superintendent Health Visitor.

Dental inspections

Dental inspections were carried out at the day nurseries during the year and the condition of the children's teeth found to be good. Nearly all had clean healthy mouths free from decay. Exceptions were some of the older children who had one or more teeth in various stages of decay, but most of the defects had not progressed too far. Simple treatment, chiefly preventive, was sufficient to restore dental fitness. Few teeth were so badly decayed as to require extraction. Oral hygiene was kept at a high standard by the routine of finishing meals with a piece of apple or raw carrot.

Nurseries and Child Minders Regulation Act, 1948

(as amended by Section 60 of the Health Services and Public Health Act 1968)

At the beginning of the year there were 119 registered child minders (487 places), and 92 day nurseries (1,829 places). During the year, 63 applicants were registered as child minders (165 places); 47 certificates of registration were surrendered (117 places); and 21 additional places were approved for persons already registered: so that at the end of 1970 there were 135 child minders with 556 places. 31 day nurseries (690 places) were registered, and four (60 places) ceased to operate; 70 additional places were approved for persons already registered, bringing the number of day nurseries at the end of the year to 119 with 2,529 places.

In 1969 the County Council considered the existing provision for the care and education of young children below school age, and what might be done to improve the facilities available. Arising from this a joint fund of £3,400 was allocated by the Health and Education Committees in the 1970/71 estimates, and during the year £1,875 was distributed to voluntary bodies to assist them in establishing, equipping and running pre-school play groups in those areas where the children's needs were the greatest. Help was also given to individual children by paying their fees for attendances at play groups.

A programme of pilot training courses to improve the knowledge and qualifications of people working with pre-school children, especially in play groups, was put into operation at various Colleges of Further Education in the county. The arrangements continued whereby the Education Committee placed suitable furniture and equipment, which primary schools no longer required, at the disposal of pre-school play groups, more especially to those in areas of special social need, and charged no rent to play groups meeting in Education Committee premises.

The sum of £2,000 which was made available in 1969 under the Government's Urban Programme of assistance to areas of acute social need continued to help play groups in the Staveley and Shirebrook areas.

PART III—NURSING SERVICES

Home nursing

The number of patients treated and visits paid by the Home Nurses are given below:-

Total number of persons nursed during the year	10,760
Number under five years of age	259
Number of persons aged 65 years and over	6,154

The authority's stock of nursing aids was increased. These include such items as mattresses, beds, wheelchairs, commodes, urinals, crutches, walking sticks and air rings, which prove very helpful in the nursing care of patients in their own homes. Ripple beds (for the prevention of pressure sores) are frequently lent on a short-term basis to appropriate cases. Requests for equipment were received from home nurses, health visitors, general medical practitioners, social workers and hospitals, and as greater emphasis is being placed on nursing patients in the home the number of requests has risen and is likely to continue to do so. The numbers of incontinence pads, pants and pant interliners supplied to patients have steadily increased since they were first supplied in 1961, when some 3,900 incontinence pads were provided. The comparable figure for 1970 is just over 160,000.

At the end of the year there were 135 Home Nurses and 6 Home Nurse/Midwives on the staff.

Midwifery

The local supervision of midwives practising in the administrative county is the responsibility of the County Council. At the end of 1970 there were 189 midwives on the county roll—105 working in hospitals or maternity homes; 76 employed by the County Council as domiciliary midwives; 2 employed by Leicestershire County Council who sometimes attend patients in Derbyshire; and 6 home-nurse/midwives employed by this authority.

Domiciliary midwifery

The authority provides a domiciliary midwifery service throughout the administrative county. During the year the Council's midwives attended 1,903 home confinements (compared with 2,263 in the previous year). The number of babies delivered in hospitals and other institutions, but discharged and attended by domiciliary midwives before the tenth day, was 6,589 (comparable with 5,549 in 1969). The domiciliary confinements comprised just over 20% of the notified births.

Training of pupil midwives

Arrangements have been made with the Sheffield Regional Hospital Board for the training of pupil midwives in the Chesterfield area. These provide for the Board paying the pupil midwives'

salaries as well (if necessary) as a weekly sum to the midwife for providing board and lodging for each pupil, while the County Council pays £45 per annum to the Midwifery Teacher.

Health Visiting

Details are given below of the types of cases visited by Health Visitors during the year:-

<i>Type of case</i>	<i>No. of cases visited</i>		
Children born in 1970	10,403
" " 1969	9,086
" " 1965/68	16,220
Total ..			35,709
Persons aged 65 years and over	6,481 (3,817)
Mentally disordered persons	178 (111)
Persons discharged from hospital (other than maternity or mental cases)	562 (417)
Tuberculous households visited	237
Homes visited on account of other infectious illnesses	148
Other cases	5,667

(Note: The figures in brackets are the number of persons visited at the special request of a general medical practitioner or hospital).

At the end of the year there were 87 whole-time and 2 part-time Health Visitors on the staff; 5 student health visitors sponsored by the authority; and 5 school nurses.

Attachment of nursing staff to general medical practitioners

At the end of the year, 52 health visitors, 80 home nurses and 22 domiciliary midwives were "attached" to family doctor practices.

PART IV—PREVENTION OF ILLNESS, CARE AND AFTER CARE

Health education

1. Certain aspects of health education, for example drug addiction, lend themselves to sensationalism, and whilst important, do tend to obscure the vast amount of information given to all sections of the public on the basic principles of good health. The need to maintain a high level of immunisation, the importance of good dietary habits, food and personal hygiene, dental health, care of the infant, and mental health have an important part to play in the health and well-being of the individual and the community, and must be given their place in a comprehensive health education programme.

2. A high level of activity in all fields has been maintained during 1970, although care has to be taken to prevent demands on the service becoming such that effort becomes unco-ordinated and piecemeal.

3. *Film shows and talks.*

The table on page 24 indicates the film shows and talks given by members of a panel of lecturers composed of health visitors, public health inspectors, school medical officers, health education officer etc. but does not include figures for films borrowed directly by other organisations where no member of the authority's staff was present.

4. *Posters and leaflets.* A month by month subject programme was distributed to Health Visitors for 1970, as follows:-

January	Hypothermia
February	Measles
March	Nutrition
April	Smoking and lung cancer
May	Care of the feet
June	Food hygiene
July	} Summer Safety
August	
September	Preparation for school
October	Fireworks
November	Care of the elderly
December	Christmas safety

Each month sets of appropriate posters and, where necessary, leaflets were distributed. On those occasions where suitable posters were not available for purchase, it was necessary to have our own designs printed locally.

5. *Displays*

Monthly displays in the clinics are changed by the health visitors on a basis of the monthly poster topics. Materials for display are available from the central stores, and any special items not in stock are purchased or made, for example, from polystyrene using a hot wire cutter.

<i>Subject</i>	<i>Child Health Clinics</i>	<i>Relaxation and Mothercraft Classes</i>	<i>Parent-craft Classes</i>	<i>Schools</i>	<i>Voluntary Organizations</i>	<i>Others</i>	<i>Total Sessions</i>	<i>Audience (approx)</i>
Child Care and Development	37	457	46	143	183	58	924	22,709
Sex Education and Personal Hygiene ..	10	642	85	723	119	46	1,625	63,160
Smoking and Cancer Education ..	10	32	—	391	139	48	620	39,463
Drug Addiction	—	1	—	269	170	68	508	26,008
Nutrition	21	490	10	235	105	40	901	27,992
Food Hygiene	16	87	2	140	71	14	330	15,584
Dental Health	48	62	—	402	85	20	617	33,400
General Health	69	68	2	664	160	56	1,019	69,900
Resuscitation	27	50	9	157	180	129	552	38,323
Home Safety	117	98	7	483	302	76	1,083	59,923
Others	62	116	16	394	356	130	1,074	59,282
Specially Hired Films	—	—	—	—	4	16	20	172
TOTALS	417	2,103	177	4,001	1,874	701	9,273	455,916

6. *Exhibitions*

During the year the Health Education service was directly involved in exhibitions at Swadlincote, Eckington, Long Eaton, Ilkeston, Chapel-en-le-Frith, and at the Royal Society for the Prevention of Accidents Conference in London, and also manned the General Dental Council Exhibition Caravan at the County Show, Elvaston, on Whit Monday. In addition, the Home Safety Committee borrow materials or complete stands for use at trade fairs, exhibitions, etc.

7. *Home safety*

The fourteen Home Safety Committees have continued their policies of promoting an awareness of home safety within their local communities through the distribution of posters, leaflets, specially printed serviettes and other publicity materials to schools, old people's clubs, public libraries etc. Posters are displayed on local billboards, and in some areas on bus panels. A number of Committees have organised newspaper quizzes or poster and essay competitions in schools. The 16mm sound film, 'The Researchers' made jointly by a junior school, the Chapel-en-le-Frith R.D.C. Home Safety Committee and the Health Education Service has been much used in all parts of the County, and aroused much interest when it was exhibited at the Royal Society for the Prevention of Accidents Home Safety Conference in October. Each local Committee is a member of the East Midlands Home Safety Group through which resolutions can be put to the National Home Safety Committee and the appropriate Government Departments, and during the year a number of resolutions have been adopted.

8. *In-service training, courses, and conferences.* With the exception of training new Health Visitors in the use of various visual aids, and participating in the Home Help training courses and School Meals Service staff courses, no in-service training has been undertaken. However, the bulk of the visual aids, films, projectors, resuscitation models etc. used in Ambulance Service training courses is provided from our stocks.

Officers of the Health Department have taken part in a number of courses and conferences organised by the Education Department for youth leaders, teachers, etc. at teachers' centres, the Matlock College of Education and Lea Green Centre, as well as some organised by the Red Cross and St. John Ambulance Brigade.

Chiropody

At the end of the year, 27 clinics were providing chiropody services, staffed by 5 whole-time and 17 part-time chiropodists (altogether equal to approximately $10\frac{1}{2}$ officers. The establishment was for 15 whole-time officers).

The following table indicates the treatment carried out during 1970:-

	<i>Elderly</i>		<i>Physically handicapped</i>		<i>Expectant mothers</i>		<i>No. of sessions</i>
	<i>Patients</i>	<i>Treatments</i>	<i>Patients</i>	<i>Treatments</i>	<i>Patients</i>	<i>Treatments</i>	
Treatment at clinics	6,114	25,013	324	1,187	4	6	4,100
Domiciliary treatment	939	3,032	130	382	—	—	—

Adaptation of homes to install artificial kidney machines

Circular 2/68 of the Ministry of Health authorised local health authorities to make arrangements for the adaptation of dwellings, or the provision of additional facilities which may be necessary, for installing equipment to enable intermittent haemodialysis to be carried out at home. Adaptations were made during the year to one house, towards which the County Council made a financial contribution, bringing the number of cases assisted since 1967 to three.

Home Help Service

The day-to-day control and supervision of this service was exercised by a County Organiser, Assistant County Organiser, a Tutor/Organiser, 9 Area Organisers and 10 Assistant Area Organisers.

The following table sets out the work done during the three years 1968 to 1970. The tendency for an increasing number of elderly people to benefit, which has been manifest for many years, continued in the year under review.

<i>Category</i>				1968	1969	1970
Aged 65 years and over	..	..		4,634	4,923	5,384
Chronic sick and tuberculous	}	Aged under 65 years		320	458	365
Mentally disordered				14	21	21
Maternity				202	140	103
Others				132	32	133
Totals	..	..	..	5,302	5,574	6,006

Population screening surveys

Exfoliative cytology

(smear tests for cancer of the neck of the womb)

During the year, 5,942 cytology smears were taken at 24 clinics.

Phenylketonuria

Arrangements were made during the year for the domiciliary midwives to carry out the "Guthrie" blood test for the detection of phenylketonuria in the part of the County which is in the area of the Sheffield Regional Hospital Board. (This superseded the scheme introduced in 1961 under which health visitors, latterly assisted by midwives, tested the urine of babies by the phenistix method). In the north-west of the County, which is within the area of the Manchester Regional Hospital Board, the phenistix test continued in operation but it is anticipated that towards the end of 1971 the "Scriver test" will be introduced in this part of the county.

No positive results were recorded in respect of children born during 1970.

PART V—AMBULANCE SERVICE

Structure and Organisation

During the year the administrative county was served by a wholly directly operated service from:-

- (a) four main stations with radio control and one sub-station all of which were manned throughout the 24 hours; and
- (b) eight sub-stations manned from 8 a.m. to midnight daily.

In respect of the stations manned for 16 hours daily, night cover was afforded by standby arrangements augmented by the main stations' resources, with the exception of Glossop where night cover was given by the Duckinfield Ambulance Station operated by the Cheshire County Council.

The building of the new 24 hour manned ambulance station at Heath to give additional cover to the London—Yorkshire (M1) motorway as well as to the eastern boundary of the county was well advanced by the end of the year and the station became fully operational on 1st February, 1971.

The special mutual aid arrangements between the county council and Derby County Borough which were commenced on 1st January, 1969 were continued during the year.

The Superintendents of the main stations continued to supervise the day stations within their own telephone area during the absence of the day station Superintendents for short periods.

The following procedure is adopted for calling an ambulance:-

(a) *Urgent calls*

If ambulance transport is required to deal with an urgent case, such as a street accident, all that is necessary is to call the telephone exchange operator and ask for "Ambulance". The caller would be automatically put through to the appropriate ambulance station, when the call would be accepted and dealt with regardless of whom the caller might be.

(b) *Non-urgent calls*

If a patient is suffering from a non-urgent condition, an ambulance or other form of suitable transport would be provided as appropriate, on the authority of a doctor, dentist, nurse or midwife, providing, of course, the patient cannot reasonably be required to travel by public transport.

The Council has kept all hospitals and other institutions for the sick, all general medical practitioners, dentists, nurses, domiciliary midwives, the Police, the Fire Service and Telephone Authorities, in or serving the County, informed of the addresses and telephone numbers of the Ambulance Stations in the County and the method of calling an ambulance.

The arrangements, which were made at the inception of the Service, whereby the New Mills Ambulance Station gave ambulance cover to the Disley area on behalf of the Cheshire County Council throughout the 24 hours, were continued. Similar reciprocal arrangements in force since the "appointed day" with other neighbouring authorities along the whole of the County boundary were continued, in the interests of economy and efficiency.

As in the past, all long distance journeys outside the County were dealt with centrally. In order to reduce the amount of detailed accounting in respect of journeys undertaken on behalf of other authorities, the arrangements with certain neighbouring authorities to waive charges were continued during the year.

The following is a list of addresses and telephone numbers of the County Council's Ambulance Stations at the time of writing this Report.

Addresses and Telephone Numbers of Ambulance Stations.

Ambulance Station	Telephone Numbers		Address
	8 a.m. - midnight	midnight - 8 a.m.	
Main Station *MICKLEOVER	Derby 53916	Derby 53916	Station Road, Mickleover, Derby.
Sub-Stations Ashbourne	Ashbourne 3236		Park Avenue, Ashbourne.
Long Eaton	Long Eaton 5151		Briar Gate, Long Eaton.
Swadlincote	Swadlincote 7041		Civic Centre, Off Midland Road, Swadlincote.
Main Station *RIPLEY	Ripley 2175	Ripley 2175	Ivy Grove, Ripley.
Sub-Stations Ilkeston	Ilkeston 3401		Manners Avenue, Ilkeston.
Matlock	Matlock 2291		Sherwood Road, Matlock.
Main Station *BUXTON	Buxton 2012	Buxton 2012	Park Road, Buxton.
Sub-Stations New Mills	New Mills 3333		Park Road, New Mills.
Bakewell	Bakewell 2551		Baslow Road, Bakewell.
Glossop	Glossop 3101		Chapel Street, Glossop.
Main Station *CHESTERFIELD	At all times		Old Road, Ashgate, Chesterfield.
Sub-Stations **Eckington	Chesterfield 6282		Castle Hill, Eckington.
***Heath			M1. Compound, Holmewood Road, Heath.

*Manned throughout the 24 hours and equipped for radio control.

**Manned throughout the 24 hours. Apart from the requisitioning of ambulance transport, the Telephone No. of this Station is Eckington 2391.

***Manned throughout the 24 hours. Apart from the requisitioning of ambulance transport, the Telephone No. of this Station is Holmewood 651.

NOTES : (a) For all emergency cases, call the Telephone Exchange and ask Operator for "AMBULANCE".

(b) In all cases of difficulty in contacting a Sub-Station manned only from 8 a.m. to midnight contact should be made, where necessary, with the appropriate Main Station indicated above.

Conveyance of mentally disordered patients

No change was made in connection with the transportation of mental patients. The Mickleover Ambulance Station, which is located approximately one mile from the Pastures Hospital, conveyed mental patients to and from that hospital; under this arrangement full advantage was taken of the use of specially trained nurses from the hospital, for escort purposes. The remaining Ambulance Stations in the County dealt with the transportation of mental patients outside the scope of this arrangement.

During the year the Matlock Ambulance Station provided transport for the conveyance of patients to and from the Special Care Unit at Belper. Transport was similarly provided by the Ilkeston and Long Eaton Ambulance Stations from June, 1969, for the conveyance of patients to and from the Special Care Unit at Stanton Vale, Ilkeston.

The County Ambulance Service continued to operate a vehicle for the transportation of the physically handicapped from the Matlock Ambulance Station on behalf of the Social Services Department, the Ambulance Service being responsible for its general maintenance and for providing the driver.

Conveyance of patients by rail

The conveyance of patients by ambulance/rail/ambulance transport is generally accepted as the recognised method for long distance journeys. The number of rail journeys undertaken during the year under review was 100 compared with 109 the previous year. The staff of British Railways, as well as other Local Health Authorities, have been most co-operative in connection with the transportation of patients under these arrangements. Similarly the British Red Cross Society and the St. John Ambulance Brigade have been most helpful in providing escorts.

Infectious diseases

As in the past, no special vehicles were set aside for this purpose and all cases of infectious diseases requiring ambulance transport were conveyed by the general Ambulance Service. All ambulance personnel are familiar with the procedure for the disinfection of ambulances and equipment. As hitherto, the special equipment for dealing with cases of smallpox or suspected smallpox is held at each Main Station in the County.

In 1967, however, the Regional Liaison Committee of Local Health Authorities and the Sheffield Regional Hospital Board agreed that the transportation of all cases (or suspected cases) of smallpox arising in the North of the Region be dealt with by the Sheffield Ambulance Service and in the South of the Region by the Leicestershire Ambulance Service.

During 1968 the Regional Liaison Committee of Local Health Authorities and the Manchester Regional Hospital Board made similar arrangements for such cases arising in the North West of the County to be conveyed by the Manchester Ambulance Service.

All ambulance personnel under the Conditions of Appointment are required to agree to vaccination against smallpox at such intervals as may be determined by the County Medical Officer of Health, and the following table shows the number of ambulance personnel vaccinated during the past five years, in accordance with the policy instituted in 1951 for this to be carried out biennially:-

<i>Year</i>	<i>Smallpox Vaccinations</i>			
1966	159
1967	93
1968	143
1969	93
1970	124

Major accidents

The procedure for dealing with major accidents is reviewed from time to time and amended instructions issued due to changed circumstances either within the Police, Fire and Ambulance Services or the Hospital Organisation, as well as in the light of experiences reported on major incidents in other parts of the country.

During the year, in conjunction with the other emergency services, meetings took place with the Staff of the East Midlands Airport in connection with major accident procedure, and an exercise was arranged.

Telecommunications

The system comprising the use of two frequencies, i.e. one for the North and one for the South of the County became fully operational from 12th June, 1970.

The following table indicates the number of mobile equipments operating under the respective fixed stations on 31st December, 1970.

<i>Controlling Base Station</i>	<i>Sub-Station</i>	<i>Number of Mobile Equipments</i>
Buxton .. ..	.. ..	11
	<i>Bakewell</i> ..	5
	<i>Glossop</i> ..	5
	<i>New Mills</i> ..	5
Chesterfield ..	.. ..	15
	<i>Eckington</i> ..	12
Mickleover ..	.. ..	8
	<i>Ashbourne</i> ..	4
	<i>Long Eaton</i> ..	7
	<i>Swadlincote</i> ..	6
Ripley .. ..	.. ..	13
	<i>Ilkeston</i> ..	6
	<i>Matlock</i> ..	7
	Total ..	104

Premises

The new ambulance station at Heath to serve the (M.1) motor-way in the north-east of the county, and to provide additional cover to the area, was taken over on 4th January, 1971 and it became fully operational on 1st February, 1971. The new station comprises a single storey administrative block and garage to accommodate ten vehicles as well as a vehicle maintenance bay. The building is of traditional construction.

Personnel

(a) Safe driving awards

The following table shows the results of the 1970 competition of the Royal Society for the Prevention of Accidents, together with those of the previous five years:-

Year	Entered	Not Eligible	Disqualified	Diploma	5 Year Medal	Bar to 5 Year Medal	10 Year Medal	Bar to 10 Year Medal	15 Year Brooch	Bar to 15 Year Brooch	20 Year Brooch	Bar to 20 Year Brooch	25 Year Brooch	Bar to 25 Year Brooch	Exemptions
1965	202	6	31	64	14	41	9	18	1	9	—	1	—	—	8
1966	227	10	34	74	4	56	3	25	1	8	1	1	1	—	9
1967	242	5	26	108	5	43	9	23	4	10	—	1	—	1	7
1968	237	2	33	91	12	40	6	26	3	12	3	2	—	—	7
1969	198	2	32	89	8	28	7	13	3	4	1	1	—	—	10
1970	199	5	38	76	16	26	9	10	1	5	—	3	—	—	10

The total number of accidents in which Ambulance Service vehicles were involved during the year was 119 compared with 151 for 1969.

(b) Training

During the year, the Service continued its policy of training by way of induction courses held at South Darley for new entrants and by the attendance of ambulance personnel at South Darley and Wrenbury Hall, Cheshire, on 2 weeks' and 6 weeks' courses leading to the award of the Proficiency Certificate.

(c) Establishment

The following table shows the authorised establishment of ambulance personnel as at the 31st December, 1970:-

Ambulance Station	Station Superintendents	Shift Leaders	Senior Drivers	Driver/Attendants			Total
				Rotary Shift Workers	Alternating Shift Workers	Day Workers	
Ashbourne	1	—	1	—	8	—	10
Bakewell	1	—	1	—	9	—	11
Buxton	1	5	—	24	—	—	30
Chesterfield	1	5	—	24	—	8	38
Eckington	1	5	—	24	—	1	31
Glossop	1	—	1	—	9	—	11
Ilkeston	1	—	1	—	10	1	13
Long Eaton	1	—	1	—	10	1	13
Matlock	1	—	1	—	11	1	14
Mickleover	1	5	—	21	—	1	28
New Mills	1	—	1	—	9	1	12
Ripley	1	5	—	24	—	8	38
Swadlincote	1	—	1	—	10	1	13
TOTAL	13	25	8	117	76	23	262

Vehicles

In respect of the year under review the following vehicles were ordered:-

- (a) Nine Bedford/Lomas ambulances (2/4 stretcher type) on the J.1 chassis.
- (b) Two Bedford/Hanlon ambulances (2/4 stretcher type) on the J.1 chassis.
- (c) Five Lomas ambulance conversions of the Bedford 25 cwt. C.F. van.
- (d) Two Wadham ambulance conversions of the Bedford 25 cwt. van.

<i>Location</i>	<i>Number of Ambulances</i>	<i>Number of Light Ambulances</i>
Ashbourne	3	1
Bakewell	3	2
Buxton	7	4
Chesterfield	11	3
Eckington	7	5
Glossop	4	2
Ilkeston	4	3
Long Eaton	5	3
Matlock	3	3
Mickleover	6	3
New Mills	4	1
Ripley	9	3
Swadlincote	4	2
Totals ..	70	35

The following Table shows the average:-

(a) daily mileage travelled; (b) number of patients conveyed per day; and (c) mileage per patient; compared with similar figures for the corresponding months of the previous three years:

Month	1967			1968			1969			1970		
	Average Daily Mileage	Average Daily Patients	Average Miles per Patient	Average Daily Mileage	Average Daily Patients	Average Miles per Patient	Average Daily Mileage	Average Daily Patients	Average Miles per Patient	Average Daily Mileage	Average Daily Patients	Average Miles per Patient
January ..	5,744	808	7.1	5,796	850	6.8	5,505	792	7.0	5,600	762	7.3
February ..	5,856	821	7.1	5,690	855	6.7	5,200	732	7.1	5,713	806	7.1
March ..	5,699	794	7.2	5,614	822	6.8	5,387	754	7.1	5,358	758	7.1
April ..	5,472	769	7.1	5,398	755	7.2	5,279	729	7.2	5,956	855	6.9
May ..	5,751	818	7.0	5,615	834	6.7	5,409	752	7.2	5,699	784	7.3
June ..	5,898	823	7.2	5,060	706	7.2	5,728	801	7.2	6,229	879	7.1
July ..	5,547	759	7.3	5,602	789	7.1	5,703	811	7.0	5,999	839	7.1
August ..	5,322	725	7.3	5,311	722	7.4	5,207	698	7.5	5,136	682	7.5
September ..	5,650	822	6.9	5,191	688	7.5	5,269	708	7.4	5,971	810	7.4
October ..	5,670	820	6.9	5,610	799	7.0	5,930	853	6.8	5,343	714	7.4
November ..	5,907	885	6.7	5,554	796	7.0	5,593	793	7.0	5,749	804	7.1
December ..	5,185	728	7.1	4,967	679	7.3	5,580	762	7.3	5,604	782	7.2
Averages for the year ..	5,565	778	7.2	5,455	776	7.1	5,485	766	7.2	5,693	789	7.2

N.B. Figures for the conveyance of patients by the Welfare vehicle were included for the first time in the figures for March, 1968, so that statistics since that date are not strictly comparable with the previous figures. Similarly, figures for the conveyance of mentally handicapped children to the Special Care Unit at Stanton Vale were included for the first time in the figures for June, 1969, so again the statistics since that date are not strictly comparable with the previous figures. Similarly figures for the conveyance of mentally handicapped children to the Special Care Unit at Ashbourne were included for the first time in the figures for January 1970, also figures for the conveyance of mentally handicapped children to the Special Care Unit at Chinley were included for the first time in the figures for November, 1970, so again the statistics since that date are not strictly comparable with the previous figures.

The following Table shows the number of patients conveyed by ambulance stations and the mileage covered by ambulances and light ambulances during 1970:-

Station	Light Ambulances			Ambulances			Totals		
	Accident & emergency	Total cases	Mileages	Accident & emergency	Total cases	Mileages	Accident & emergency	Total cases	Mileages
Buxton	13	4,973	46,716	650	13,575	106,454	663	18,548	153,170
Chesterfield	16	9,241	59,885	1,421	42,121	214,164	1,437	51,362	274,049
Eckington	30	10,028	97,809	658	18,009	149,330	688	28,037	247,139
Mickleover	14	6,472	81,130	496	9,844	107,650	510	16,316	188,780
Ripley	14	9,926	86,658	819	31,364	252,233	833	41,290	338,891
Ashbourne	3	1,724	17,316	192	5,311	43,425	195	7,035	60,741
Bakewell	3	3,892	44,814	288	5,169	57,256	291	9,061	102,070
Glossop	47	5,707	34,791	663	8,607	44,967	710	14,314	79,758
Ilkeston	26	5,825	48,792	379	13,456	68,870	405	19,281	117,662
Long Eaton	16	4,227	31,189	464	15,994	90,098	480	20,221	121,287
Matlock	11	6,290	60,136	398	9,906	73,730	409	16,196	133,866
New Mills	-	1,779	13,754	192	9,317	59,021	192	11,096	72,775
Swadlincote	6	6,632	44,322	305	16,721	85,384	311	23,353	129,706
TOTALS ..	199	76,716	667,312	6,925	199,394	1,352,582	7,124	276,110	2,019,894

NOTE: The above figures do not include the respective details for patients carried by the Matlock Ambulance Station to and from the Special Care Unit at Belper, the Long Eaton and Ilkeston Ambulance Stations to and from the Stanton Vale Special Care Unit, the Ashbourne Ambulance Station to and from the Cokayne Special Care Unit and the Glossop, New Mills and Buxton Ambulance Stations to and from the Alderbrook Special Care Unit.

The following table shows the number of patients conveyed and the mileage covered monthly by ambulances and light ambulances during the year 1970:-

Month	Light Ambulances			Ambulances			Totals		
	Accident & emergency	Total cases	Mileages	Accident & emergency	Total cases	Mileages	Accident & emergency	Total cases	Mileages
January	14	6,472	56,032	455	16,184	112,536	469	22,656	168,568
February	11	6,022	52,255	476	15,680	103,165	487	21,702	155,420
March	18	6,369	53,146	533	16,230	108,215	551	22,599	161,361
April	31	7,889	66,528	505	16,721	108,149	536	24,610	174,677
May	14	7,022	61,034	590	16,087	110,018	604	23,109	171,052
June	12	6,941	61,430	590	18,233	119,466	602	25,174	180,896
July	29	6,877	61,405	589	18,264	120,137	618	25,141	181,542
August	21	5,406	49,255	633	15,427	107,918	654	20,833	157,173
September	12	6,014	50,794	568	17,204	122,632	580	23,218	173,426
October	11	5,362	48,912	719	15,834	112,534	730	21,196	161,446
November	12	6,233	53,597	584	16,558	113,044	596	22,791	166,641
December	14	6,109	52,924	683	16,972	114,768	697	23,081	167,692
TOTALS	199	76,716	667,312	6,925	199,394	1,352,582	7,124	276,110	2,019,894

NOTE: The above figures do not include the respective details for patients carried by the Matlock Ambulance Station to and from the Special Care Unit at Belper, the Long Eaton and Ilkeston Ambulance Stations to and from the Stanton Vale Special Care Unit, the Ashbourne Ambulance Station to and from the Cokayne Special Care Unit and the Glossop, New Mills and Buxton Ambulance Stations to and from the Alderbrook Special Care Unit.

PART VI—MENTAL HEALTH

Staff training

Adult Training Centres: Two members of the staff who had been seconded on courses for the Diploma of the Training Council for Teachers of the Mentally Handicapped gained the Diploma and returned to their centres, and four more started on one-year full-time courses for the Diploma in September.

Junior Training Centres: Two assistant supervisors gained the Diploma. At the end of the year 6 trainee assistant supervisors and one assistant were away on courses, some for the Diploma and some for the full course for the Certificate in Education. I am glad to say that at the time of the transfer to the Education service (April 1971) the great majority of teachers in the junior training centres were qualified Diploma-holders, owing to the forward looking policy of the Health Committee.

Mental Welfare Officers: Three mental welfare officers returned from secondment on full-time two-year courses, having gained the Certificate of the Council for Training in Social Work, and one became qualified as a psychiatric social worker. At the end of the year four mental welfare officers were away on full-time courses for qualification.

Other training: In addition, various short refresher courses were attended by staff during the year, and the Matron of the hostel for mentally handicapped children attended an in-service study course, in Stockport, for residential child care staff on weekly day release, leading to the Central Training Council's award of a certificate of attendance. In-service training and the placement of students from outside the authority with mental welfare officers or in training centres were as usual an important feature of the year's work.

New premises opened

New venture at Chinley

An extension at the Alderbrook Adult Training Centre, Chinley, formerly offering 50 places, took the form of an advanced training workshop with 20 places and a special training group with 12 places for those with severe physical as well as mental handicap, or other problems which made them unsuitable for the ordinary training centre. Eleven of the 12 places were quickly taken up and all concerned were gratified to notice a considerable improvement in these severely retarded people with the intensive care and stimulation provided.

Alderbrook Junior Training Centre was also extended with the provision of a nursery class and a special class for the more severely handicapped.

Other provision for severely mentally and physically handicapped children

At Ashbrook Junior Training Centre, Chesterfield, a special class and a nursery class were added, with a further extension to the centre which made a total increase of 30 in the number of places provided.

At Parkwood, Alfreton, similar provision was nearly completed at the end of the year, so that shortly after it ended, 95 places were also available there.

By the time of the transfer to the Education Authority, the provision of nursery and special classes in junior training centres in the county was virtually complete, the exception being in the south-west, where financial stringency had caused the postponement of special care provision, the only Centre, in converted premises at Woodville, being unsuitable for the accommodation of this type of child.

Small centre at Ashbourne

At the beginning of the year a small centre catering for 15 juniors (including a special class) and 15 adults was opened at Ashbourne. This was run as separate junior and adult centres, but shared a number of common services.

Hostel for the rehabilitation of the mentally ill

Another new venture started in 1970 was the opening of a hostel for persons recovering from mental illness, as a stage towards full return to the community. This small establishment, with 12 places, is in Derby. The residents are expected to be in work, and to be able to leave and become fully independent after a period of a few months, the length of time varying according to the individual.

General working of the service

In general the activities of the service continued on the lines of previous years. The mentally handicapped trainees had their annual holiday at Rhyl; the car-wash at Alfreton continued to be successful; the training centres held their usual sales of work and open days, which were well attended. One new activity was a sports day for all the training centres, one for the juniors and one for the adults, which owed much to the inspiration of the Chairman of the Health Committee (Alderman Gardner) and which were held on two glorious days in the summer, to the great enjoyment of all the trainees and many visitors.

The mental welfare service, operating in 8 area offices shared with other social services, found the new arrangement very helpful and it was of course a great step on the way to the new social services area organisation which was to come into being in 1971.

MENTAL HEALTH STATISTICS FOR 1970
Number of persons under Local Health Authority care at 31st December, 1970

Table 1.

	Mentally ill				Elderly mentally infirm*		Psychopathic				Mentally Handicapped				Severely M. H'capped				Total
	Under age 16		16 & over		M. (5) F. (6)		Under age 16		16 & over		Under age 16		16 & over		Under age 16		16 & over		
	M. (1)	F. (2)	M. (3)	F. (4)	M. (5)	F. (6)	M. (7)	F. (8)	M. (9)	F. (10)	M. (11)	F. (12)	M. (13)	F. (14)	M. (15)	F. (16)	M. (17)	F. (18)	
1. Total number	3	-	313	419	44	110	-	-	23	8	107	68	379	349	132	135	193	193	2,476
2. Attending workshops, day centres or training centres (including special units)	-	-	22	11	2	-	-	-	-	-	92	63	177	134	100	115	89	90	895
3. Awaiting entry to workshops, day centres, or training centres (including special units)	-	-	3	5	-	-	-	-	-	-	3	-	5	3	7	4	6	7	43
4. Receiving home training	-	-	-	-	-	-	-	-	-	-	1	-	11	18	-	1	2	-	33
5. Awaiting home training	-	-	-	-	-	-	-	-	-	-	-	-	1	1	1	-	-	-	3
6. Resident in L.A. home/hostel	-	-	2	3	-	-	-	-	-	-	7	2	21	15	2	4	7	5	68
7. Awaiting residence in L.A. home/hostel	-	-	1	1	3	22	-	-	-	-	1	-	27	39	-	-	9	6	109
8. Resident in other home/hostel	-	-	-	-	-	-	-	-	-	-	3	-	5	-	1	1	2	4	16
9. Boarded out in private household	-	-	-	-	-	-	-	-	1	-	-	-	-	-	1	-	1	-	3
10. Attending day hospital	-	-	9	13	7	11	-	-	1	-	-	-	1	-	-	-	-	5	47
11. Receiving home visits and not included in lines 2-10																			
(a) suitable to attend a training centre	1	-	19	13	2	2	-	-	1	-	5	1	38	42	7	5	35	22	193
(b) Others	2	-	257	373	30	75	-	-	20	8	5	4	146	145	18	8	62	72	1,225

• The elderly mentally infirm included in this form are only those who receive services or are in accommodation provided under the National Health Service Act 1946. The elderly mentally infirm who reside in accommodation provided under the National Assistance Act, 1948, are not included.

12. Number of children under age 16 attending training centres who have not been included in item 2 overleaf because they do not come within the categories covered in columns (1) to (18)	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	Male	..
	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	Female	1
13. Number of persons included in item 6 overleaf who reside in accommodation provided under the National Assistance Act, 1948	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	Male	2
	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	Female	1

Notes: 1. The terms mentally handicapped and severely mentally handicapped are now used in place of subnormal and severely subnormal.

2. Figures refer only to those persons who are the Authority's own responsibility and include those attending a centre or resident in a hostel belonging to another authority or voluntary or private organisation. Persons resident in hospitals who are attending centres are included provided that they are the authority's own responsibility.

3. Persons resident in accommodation provided under the National Assistance Act, 1948, are included if they are mentally ill, psychopathic, mentally handicapped or severely mentally handicapped.

4. Persons are included in more than one of the categories listed. Item 1 is not a total of the figures in items 2—11, but is the total number of persons under care at the end of the year.

5. Persons awaiting hospital treatment who are included in Table 2 are also included in this table.

Table 2. Number of patients awaiting entry to hospital, admitted for temporary residential care, or admitted to Guardianship during 1970.

	Mentally ill				Elderly Mentally Infirm		Psychopathic				Mentally Handicapped				Severely M. H'capped				Total
	Under age 16		16 & over		M.	F.	Under age 16		16 & over		M.	F.	Under age 16		16 & over				
	M.	F.	M.	F.			M.	F.	M.	F.			M.	F.					
1. Number of persons in L.H.A. area on waiting list for admission to hospital at end of year:																			
(a) In urgent need of hospital care ..	-	-	-	-	-	-	-	-	-	-	1	1	-	2	6	-	7	2	19
(b) Not in urgent need of hospital care ..	-	-	-	-	1	4	-	-	-	-	2	-	8	9	6	2	16	12	60
(c) Total	-	-	-	-	1	4	-	-	-	-	3	1	8	11	12	2	23	14	79
2. Number of admissions for temporary residential care (e.g. to relieve the family)																			
(a) To N.H.S. hospitals	-	-	-	-	-	-	-	-	-	-	9	4	10	18	58	24	26	26	175
(b) To L.A. residential accommodation ..	-	-	-	-	-	-	-	-	-	-	1	1	1	5	10	4	4	8	34
(c) Elsewhere	-	-	-	-	-	-	-	-	-	-	1	-	-	-	7	-	2	1	11
(d) Total	-	-	-	-	-	-	-	-	-	-	11	5	11	23	75	28	32	35	220

Note: Persons shown in item 1 above are also included in the figures of persons under L.H.A. care in Table 1.

Table 3. Number of persons referred to Local Health Authority during year ended 31st December, 1970.

Referred by	Mentally ill						Psychopathic						Mentally Handicapped						Severely M. H'capped						Total
	Under age 16			16 & over			Under age 16			16 & over			Under age 16			16 & over			Under age 16			16 & over			
	M.	F.		M.	F.		M.	F.		M.	F.		M.	F.		M.	F.		M.	F.		M.	F.		
	(1)	(2)		(3)	(4)		(5)	(6)		(7)	(8)		(9)	(10)		(11)	(12)		(13)	(14)		(15)	(16)		
(a) General practitioners	5	1	..	291	462	..	-	-	12	7	1	4	7	10	2	-	1	1	2	-	1	1	1	1	(17)
(b) Hospitals, on discharge from in-patient treatment	-	1	..	298	452	..	-	-	9	4	1	1	6	1	5	-	2	1	5	-	2	1	1	1	804
(c) Hospitals, after or during out-patient or day treatment	2	1	..	149	243	..	-	-	2	5	-	-	3	2	-	2	-	-	-	2	-	2	-	2	411
(d) Local education authorities	-	-	..	1	2	..	-	-	4	-	23	14	12	13	14	8	1	1	14	8	1	1	1	1	93
(e) Police and courts	-	-	..	29	28	..	-	-	5	1	-	-	3	-	1	-	-	-	1	-	-	-	-	-	67
(f) Other sources	4	3	..	205	282	..	-	-	22	3	31	24	78	68	28	20	26	22	28	20	26	22	22	22	816
(g) Total	11	6	..	973	1469	..	-	-	54	20	56	43	109	94	50	30	30	27	50	30	30	27	27	27	2,972

Note 1. Only one referral is recorded for one patient unless the local authority ceased to provide services after one referral and before the next.

2. "Referral" is limited to persons who are referred to the authority for the provision of services, whether centre or hostel, by means of home visits or otherwise. Referrals made for the purpose of obtaining admission to hospital are not counted.

PART VII—OTHER SERVICES

Health Centres and Clinics

Shirebrook health centre

This new health centre came into operation in October, 1970. Conveniently located near to the market place, it replaced a clinic which had hitherto been held in rented premises. The health centre accommodates a group practice of five general medical practitioners and a dentist undertaking general dental services, as well as providing facilities for the authority's health services.

Brimington clinic

A new clinic at Church Street, Brimington, was in course of erection during the year (and came into operation in February 1971).

Eckington clinic/health centre

The existing clinic at Gosber Street, Eckington, is being adapted and extended in order to provide health centre facilities for two practices of three and two general medical practitioners, in addition to the authority's health services. It is expected to come into use as a health centre in October, 1971.

Ashbourne health centre

Plans have been prepared for the erection of a health centre in Compton, Ashbourne, to accommodate two group practices, each of three general medical practitioners, together with the authority's health services. The erection of this new health centre is expected to commence towards the end of 1971.

Chesterfield Borough—health centre

It is proposed to erect a health centre on a site at Saltergate, Chesterfield, to provide accommodation for 12 general medical practitioners as well as facilities for the local authority's health services.

Registration of Nursing Homes

The County Council acts as the Authority for the Registration of Nursing Homes under sections 187 to 194 of the Public Health Act, 1936, for the whole of the Administrative County except the Boroughs of Chesterfield, Glossop and Ilkeston, the duties having been delegated to the Corporations of these Boroughs by the County Council under section 194 of the same Act. Following a report after an inspection by a medical officer on the staff of the health department, consideration is given to the registration of premises for an approved number of maternity or general nursing beds.

The position on December 31st, 1970 regarding the Homes registered in the county, except in the Boroughs mentioned above, is shown below:-

<i>Name and Address of Nursing Home</i>	<i>Accommodation approved</i>
Portland Nursing Home, "Craiglands", The Park, Buxton	17 Medical Cases.
Derby House Nursing Home, Broad Walk, Buxton	31 Medical Cases.
Lismore Nursing Home, 14 Lismore Road, Buxton	20 Cases.
St. Mary's Nursing Home, Ednaston Lodge, Ednaston	22 Medical and Surgical Cases.
Cliff House Nursing Home, Cliff House, Clowne, Nr. Chesterfield	18 Medical Cases.
Borrowash House, Borrowash, Derby ..	20 Unmarried Mothers.

The Nurses Agencies Act, 1957

This Act provides that "a person carrying on an agency for the supply of nurses shall, in carrying on that agency, only supply (a) registered nurses; (b) enrolled assistant nurses; (c) certified midwives; (d) such other classes of persons as may be prescribed."

Every person to whom a nurse is supplied by an agency is to be given a statement in writing of the qualifications of the person supplied, and such agencies are not to be carried on unless the selection of the person to be supplied for each particular case is made by or under the supervision of a registered nurse or a registered medical practitioner. The main provision of the Act affecting the County Council is that no person shall carry on an agency for the supply of nurses unless he is the holder of a licence issued by the local authority authorising him to do so. During the year, one nursing agency was licensed by this Authority.

PART VIII—EPIDEMIOLOGY

Vaccination and immunisation

The authority's services provide immunisation facilities against diphtheria, measles, german measles (rubella), poliomyelitis, smallpox, tetanus and whooping cough. These prophylactics are available at the County Council's clinics, or if patients desire they can be administered by their own medical practitioners, to whom the County Council makes available the appropriate antigens.

Diphtheria, pertussis (whooping cough), tetanus, poliomyelitis and measles.

The following is a copy of the return submitted to the Department of Health and Social Security:-

Vaccination of persons under age 16 completed during 1970

TABLE 1—Completed Primary Courses—Number of persons under age 16.

Type of vaccine or dose	Year of Birth					Others under age 16	Total
	1970	1969	1968	1967	1963-66		
1. Quadruple DTPP ..	—	—	—	—	—	—	—
2. Triple DTP	1,565	6,925	1,419	191	253	68	10,421
3. Diphtheria/Pertussis ..	—	1	—	—	1	2	4
4. Diphtheria/Tetanus ..	18	111	72	20	276	136	633
5. Diphtheria	—	—	1	—	1	—	2
6. Pertussis	—	—	4	1	—	—	5
7. Tetanus	12	12	7	9	49	604	693
8. Salk	—	—	—	—	—	—	—
9. Sabin	1,402	7,161	1,709	240	498	233	11,243
10. Measles	50	2,448	2,658	1,234	2,110	665	9,165
11. Rubella	—	—	—	—	—	1,338	1,338
12. Lines 1+2+3+4+5 (Diphtheria) ..	1,583	7,037	1,492	211	531	206	11,060
13. Lines 1+2+3+6 (Whooping Cough) ..	1,565	6,926	1,423	192	254	70	10,430
14. Lines 1+2+4+7 (Tetanus) ..	1,595	7,048	1,498	220	578	808	11,747
15. Lines 1+8+9 (Polio) ..	1,402	7,161	1,709	240	498	233	11,243

TABLE 2—Reinforcing Doses—Number of persons under age 16.

Type of vaccine or dose	Year of Birth					Others under age 16	Total
	1970	1969	1968	1967	1963-66		
1. Quadruple DTPP ..	—	—	—	—	—	—	—
2. Triple DTP ..	11	411	981	224	1,980	125	3,732
3. Diphtheria/Pertussis ..	—	1	1	1	8	2	13
4. Diphtheria/Tetanus ..	2	81	191	80	4,734	473	5,561
5. Diphtheria ..	—	2	—	1	20	7	30
6. Pertussis ..	—	—	—	—	—	—	—
7. Tetanus ..	4	1	19	22	112	596	754
8. Salk ..	—	—	—	—	—	—	—
9. Sabin ..	8	120	274	138	7,398	1,254	9,192
10. Lines 1+2+3+4+5 (Diphtheria) ..	13	495	1,173	306	6,742	607	9,336
11. Lines 1+2+3+6 (Whooping Cough) ..	11	412	982	225	1,988	127	3,745
12. Lines 1+2+4+7 (Tetanus) ..	17	493	1,191	326	6,826	1,194	10,047
13. Lines 1+8+9 (Polio) ..	8	120	274	138	7,398	1,254	9,192

Vaccination against rubella (german measles)

In July 1970 the Joint Committee on Vaccination and Immunisation recommended that vaccination against rubella should be offered to girls between their 11th and 14th birthdays and during the first phase of its introduction priority should be given to the older girls, i.e. those aged 13. There are about 4,000 girls aged 13 in the county, and by the end of the year 1,338 had been vaccinated against rubella.

Smallpox

The following table shows the number of persons under the age of 16 who have been vaccinated against smallpox during 1970:-

Age at date of vaccination	Number vaccinated	Number re-vaccinated
0-3 months ..	7	—
3-6 months ..	23	—
6-9 months ..	15	—
9-12 months ..	35	—
1 year ..	1,141	10
Total under 2 years ..	1,221	10
2-4 years ..	1,907	44
5-15 years ..	770	534
Total (persons) ..	3,898	588

No case of smallpox occurred in the county during 1970.

Bacillus Calmette Guerin (B.C.G.) vaccination against tuberculosis

There are two schemes for vaccination against tuberculosis: first, the contact scheme which is carried out by Chest Physicians through the chest clinics; and second the routine vaccination of school children between their 13th and 14th birthdays (subject to parental consent). Details of the work carried out under the two schemes are given below:-

	<i>Contact scheme</i>	<i>School children and students</i>
No. skin tested	568	4,898
No. found positive ..	101	680
No. found negative ..	425	3,915
No. vaccinated	299	3,872

Yellow fever

Persons who propose to travel to certain countries are required to possess an International Certificate of Vaccination against yellow fever as a condition of entry. The County Council's clinic at Cathedral Road, Derby, has been designated by the Department of Health and Social Security as one of the 47 centres in the country available for giving this form of vaccination, and since the scheme came into operation on 1st July, 1960, a medical officer of the County Council's staff has attended this clinic each Monday morning to vaccinate intending travellers. A charge of £1.05 is made for each vaccination performed. During the year 440 persons were vaccinated against yellow fever and provided with International Certificates.

Tuberculosis

The following are particulars of the new cases of tuberculosis of which notification was received during 1970:-

<i>Age Groups</i>	0—	1—	2—	5—	10—	15—	20—	25—	35—	45—	55—	65—	75—	<i>Total All Ages</i>
<i>Respiratory—</i>														
Males	—	—	—	—	—	—	4	4	4	8	14	1	1	36
Females	—	—	—	2	—	2	—	5	3	4	2	3	—	21
<i>Non-Respiratory—</i>														
Males	—	—	—	—	—	—	—	—	1	—	1	—	1	3
Females	—	—	—	1	—	—	—	—	—	—	2	—	—	3
Total	—	—	—	3	—	2	4	9	8	12	19	4	2	63

The incidence of this disease, for which figures are available since 1914, has steadily declined, as shown in the following table:-

Year	Respiratory		Non-respiratory	
	New cases	Deaths	New cases	Deaths
1914 ..	867	383	362	156
1924 ..	829	359	338	117
1934 ..	442	243	202	74
1944 ..	432	202	163	43
1954 ..	391	80	62	12
1964 ..	171	24	26	2
1965 ..	145	29	30	3
1966 ..	106	28	29	4
1967 ..	85	18	16	—
1968 ..	79	14	24	4
1969 ..	63	11	13	10
1970 ..	57	13*	6	1

*Includes 8 deaths from late effects of respiratory tuberculosis.

Venereal Disease

The following information has been received from treatment centres concerning the attendances of Derbyshire residents:-

Treatment Centre	Number of new cases in the year				
	Totals all venereal conditions	Syphilis		Gonorrhoea	Other venereal conditions
		Primary & Secondary	Other		
Royal Hospital, Chesterfield ..	484	—	3	122	359
Derbyshire Royal Infirmary ..	535	—	4	69	462
Burton & District Hospital ..	12	—	—	2	10
St. Thomas' Hospital, Stockport ..	36	1	2	7	26
Mansfield General Hospital ..	19	—	—	5	14
Royal Infirmary, Sheffield ..	18	—	—	2	16
Royal Hospital, Sheffield ..	22	—	—	5	17
Special Treatment Centre, Nottingham ..	189	—	—	34	155
Totals ..	1,315	1	9	246	1,059

The County Council's medical officers and health visitors have been designated to undertake contact tracing and follow-up persons believed to be suffering from venereal disease, with a view to persuading them voluntarily to undergo a medical examination, and, if necessary, to receive treatment.

The subject of sex education and personal hygiene forms part of the programme of health education: 723 sessions were assigned to this in schools during the year.

PART IX—ENVIRONMENTAL HEALTH

Inspection and supervision of food

Milk supply

The Milk (Special Designation) Regulations, 1963-5.

As a Food and Drugs Authority, the County Council is responsible for the licensing and supervision under these Regulations of milk heat treatment plants and milk dealers, other than producer-retailers. Under the Food and Drugs Act, 1955, the County Council is also responsible for the prevention of sale of milk from cows suffering from tuberculosis and certain other specified diseases. The samples taken in connection with this work are dealt with at the Public Health Service Laboratory at Derby and thanks are expressed to the Director for his ready co-operation at all times.

No changes in the Regulations were made during the year and the current list of types of licences remains as follows:-

- (i) dealers' licences for the operation of:-
 - (a) pasteurised;
 - (b) sterilized;
 - (c) ultra heat treated milk processing establishments;
- (ii) dealer's (untreated) licence, required when untreated milk, in bulk, is obtained for re-sale;
- (iii) dealer's (pre-packed milk) licence, required when dealing in pre-packed milk of any or all of the four designations.

All licences were renewable at the end of 1970, for a further period of five years.

Pasteurising plants

Seven pasteurising plants were in operation during 1970. One additional plant was licensed during the year, that of A. Heathcote & Son Ltd. of Buxton. The full list of establishments is given below.

<i>Name</i>	<i>Address of Establishment</i>
Buxton Spa Dairies Ltd.	The Creamery, Green Lane, Buxton.
Ilkeston Co-op. Society Ltd.	Derby Road, Ilkeston.
Greater Nottingham Co-op. Society Ltd.	Meadow Lane, Long Eaton.
A. Heathcote & Son Ltd.	Foxlow Farm, Buxton.
J. Payne	Sunny View Dairy, Buxton.
Unigate Foods Ltd.	Egginton, Derby.
B. Wild	Beard Hall Farm, New Mills.

Of the seven plants, four were "high temperature short time" (H.T.S.T.) and three "holder" types.

One plant closed down at 31st December, the Greater Nottingham Co-op Society Dairy at Long Eaton, the processing being transferred to the main Nottingham premises, although the Long Eaton site was retained as a distribution centre for quite a large area.

Supervision of all plants is carried out as a regular routine. Generally speaking, very little trouble is encountered and Dairy Managers are most anxious to co-operate with the authority.

The sampling figures for the year are given below.

<i>Grade of Milk</i>	<i>Satisfactory</i>		<i>Unsatisfactory</i>		<i>Total number of samples submitted</i>
	<i>M.B.</i>	<i>Phos.</i>	<i>M.B.</i>	<i>Phos.</i>	
Pasteurised	100	110	1	2	112

NOTE: (a) M.B. means the Methylene Blue Test; Phos. means the Phosphatase Test.

(b) Eleven samples were not subjected to the Methylene Blue Test as the atmospheric shade temperature exceeded 70°F. at the time of testing.

The two sample failures of the phosphatase test call for comment. In one instance the sampling history was such that it was considered necessary to issue a formal warning under the Food and Drugs Act, 1958. In the other case, the failure was a very isolated instance in an otherwise very creditable record and was dealt with informally. The methylene blue test failure occurred at a new holder plant and could be ascribed largely to inexperience in the handling of the raw milk before treatment.

Sterilizing plant

The one small plant in the County ceased to operate during the year. Milk was then bought in already bottled by the dairy concerned. This plant has had a comparatively short life of seven years and was forced to close because of rising costs, not the least of which was bottle losses. Eleven samples passed the turbidity test during the year from this plant.

Ultra heat treatment plants

There are no plants in the County of this type.

Milk dealers

Renewal of licences took place at the end of the year and as a result up-to-date figures of the position are given below.

Dealers untreated milk (bulk handling and bottling) licences	10
Dealers pre-packed milk licences	783

There has been a distinct fall in the number of licences from five years ago when the figures were:-

Dealers untreated milk licences	27
Dealers pre-packed milk licences	955

Changes in the retail shopping pattern largely account for the decrease in pre-packed licences, although there has been a fall in the number of private milk "rounds" as well. The next few years are likely to see similar variations as economic pressures on milk retail prices increase.

The designations of milk covered by the licences issued are given in the table below:-

Untreated	—	dealers	..	..	10
do.	—	pre-packed	..	..	28
Pasteurised	—	do.	..	..	685
Sterilized	—	do.	..	..	509
Ultra heat treated	—	do.	..	..	143

Suffice to say that the proportions of designations of milk actually retailed bears no relation to that of the figures shown. Well over 90% of all milk is pasteurised. Very little ultra heat treated milk is sold and not a great deal of sterilized milk in this County.

The sampling figures from milk dealers for 1970 are set out below:-

Grade of Milk	Satisfactory		Unsatisfactory		Total number of samples submitted
	M.B.	Phos.	M.B.	Phos.	
Heat Treated Pasteurised	*915	1,022	20	7	1,029
Sterilized	*94 samples not tested for Methylene Blue as shade temperature exceeded 70°F.				97
	Turbidity				
	Satisfactory		Unsatisfactory		
	97		—		
Ultra-Heat Treated	Colony Count				24
	Satisfactory		Unsatisfactory		
	23		1		
	Methylene Blue				
Raw Untreated	Satisfactory		Unsatisfactory		91
	*70		16		
	*5 samples not tested for Methylene Blue as shade temperature exceeded 70°F.				
	Total ..				
					1,241

One unsatisfactory feature of these figures is the number of phosphatase test failures. While keeping quality (methylene blue test) can be influenced by several factors, not least atmospheric temperatures, day and night, there is rarely a valid excuse for failing to pasteurise milk properly these days. Technically, the

H.T.S.T. plant is regarded as "foolproof", yet five of the seven failures originated from individual dairies with this type of plant, three outside the County. The other two were from holder type plants within the County.

The number of methylene blue test failures was less than last year but yearly variations do not really indicate much of value. As mentioned, there are many factors influencing the keeping quality of milk, and statistics so far have not supplied the answers. The basic reason for the failures is that milk has a relatively short keeping life and quite a few retailers, particularly shop keepers, still do not take this simple fact into due account.

The troubles experienced in the previous two years with ultra heat treated milk samples seem largely to have disappeared.

Of the total number of samples taken, including those from pasteurising plants, i.e. 1,353, 644 (47·6%) were from two processing dairies in Sheffield and Nottingham, 1,001 (74%) from nine dairies, and 1,137 (84%) from thirteen dairies.

Brucella abortus sampling was carried out on a limited scale by the County Health Inspector. District Councils in the County are responsible for the main sampling programme. On behalf of the County Council, laboratory examinations were made of 121 milk samples from raw milk sold by retail, of which 16 were ring test positive, 5 positive on culture test and 3 positive on guinea pig test. The majority of these samples were bottle samples and the percentage positive was 6·6, a fairly average figure over the past few years.

These cases were dealt with in accordance with established procedure. Notification is made to the producer, Divisional Veterinary Officer of the Ministry of Agriculture, Fisheries and Food, and to the Medical Officer of Health of the District where the milk was produced. The last has powers, under the Milk and Dairies (General) Regulations, 1959, to place restrictions upon the sale of such milk for human consumption.

As regards sampling by the District Councils, the following figures submitted by the District Medical Officers show what has been done during the year:-

Type of sample	Total number taken	Ring test		Culture		Guinea pig	
		Posi- tive	Nega- tive	Posi- tive	Nega- tive	Posi- tive	Nega- tive
Bottle ..	58	8	50	2	6	1	1
Herd ..	367	34	333	8	26	12	12
Group ..	190	49	141	8	42	19	28
Individual ..	449	81	368	21	185	29	30
Total ..	1,064	172	892	39	259	61	71

No. of infected cows	(a)	sent for slaughter	..	17
	(b)	isolated on farm	..	20

The Government has now announced that a start is to be made on the brucellosis area eradication scheme in 1971, in three areas in England, Scotland and Wales. It is not anticipated that Derbyshire will be covered by this scheme for several years.

Fluoridation of public water supplies

Reference was made in the last annual report to negotiations which were taking place between the County Council, the Derby Borough Council and the South Derbyshire Water Board for the fluoridation of water supplies in the Borough and in that part of the County falling within the Water Board's area of responsibility. The proposed scheme differed from those previously considered in that it obviated the necessity for adding fluoride at any point along the Derwent Valley Aqueduct. Those negotiations have now been successfully concluded and an agreement embodying the scheme has been entered into by all three authorities. As had been envisaged, the scheme provides for the addition of fluoride to the water supply at six treatment stations, at Homesford, Little Eaton, Belper (Meadows), Lindway, Stanton-by-Bridge and Wirksworth. The stations at Homesford and Little Eaton are already in operation and supply approximately 80% of the persons residing in the Board's area in the County, while the remaining four stations are expected to be in operation by the beginning of 1972. There will also be six separate monitoring stations at which the amount of fluoride in the supply will be checked. Once the scheme has been fully implemented, the only parts of the County within the Board's area whose supplies will not be fluoridated will be the Ashbourne area, which is supplied from a number of bore-holes whose treatment would be prohibitively expensive, and the Cubley area, whose natural supply already contains more fluoride than the prescribed level of 1 milligramme per litre. The cost of the scheme is apportioned between the County Council and the Borough Council in accordance with the terms of the agreement.

Previous reports have mentioned an agreement provisionally reached with the North Derbyshire Water Board for the fluoridation of water supplies in the Buxton area, by treating the sources at Stanley Moor and Lightwood Reservoirs and the Stanley Moor Bore-Hole. This scheme was held in abeyance while the Water Board investigated the possibility of using hydrofluorsilicic acid rather than sodium fluoride as the fluoridating agent, and a revised scheme employing acid was approved by the Ministry of Housing and Local Government early in 1970. In the meantime, however, improved apparatus for the dilution of the acid had become available, and in order to take advantage of this and of other technical developments the Water Board submitted to the Ministry a second revised scheme. It is expected that this scheme will be approved fairly shortly, but owing to the necessity to re-negotiate the agreement between the Board and the Council in the light of the revisions to the original scheme no firm estimate can be given of the date when it is likely to be put into operation.

General sanitary administration

Estimated number of houses:-

Municipal Boroughs and Urban Districts ..	137,828
Rural Districts	95,625

	<i>Municipal Boroughs and Urban Districts</i>		<i>Rural Districts</i>	
	<i>No. on Register</i>	<i>In- spections made</i>	<i>No. on Register</i>	<i>In- spections made</i>
Bakehouses	96	275	25	49
Common Lodging Houses	2	9	—	—
Dairies	61	94	25	55
Factories and Workplaces	1,962	1,154	854	473
Ice Cream Premises—				
(a) Manufacturers	15	59	8	46
(b) Dealers	1,613	858	1,070	1,397
Milk Distributors	486	446	234	176
Movable Dwelling Sites	54	325	203	831
Offensive Trades	10	17	—	—
Outworkers	402	163	178	140
Preserved Food Stores	512	1,055	204	372
Offices, Shops and Railway Premises	3,517	2,461	1,272	1,288
Slaughterhouses—				
(a) Public Abattoirs	1	694	—	—
(b) Private	37	4,746	42	5,032
Knackers Yards	3	43	7	113

Water supplies

Rural Water Supplies and Sewerage Acts, 1944 to 1965.

Only one scheme was considered by the Department during the year. This was a small mains extension in Glossop by Manchester Corporation (the water undertakers for the area) at an estimated cost of £2,247.

The County is covered generally by Water Boards, but in part of the south by a private company. The following reports from the two principal Boards covers the greater part of the area of the County.

South Derbyshire Water Board (*Report kindly submitted by Mr. I. G. Edwards, B.Sc., M.I.C.E., M.I.W.E., Engineer and Manager*):

	<i>No. of Houses</i>	<i>Estimated Population Involved</i>
No. of houses connected to mains ..	90,566	263,847
No. of houses supplied from standpipes or mains	—	—
No. of houses not supplied from stand- pipes or mains	1,478	4,300
No. of connections made during year:-		
(a) existing houses	20	
(b) new houses	1,699	
(c) other premises	150	

Works carried out by the Board during the year, in addition to the normal extensions of distribution mains, were as follows:-

9" dia. Main Whitemoor Lane—Openwoodgate—Completed May, 1970.

Reconstruction Park Head Reservoir, Crich—Completed February, 1970.

Reconstruction Homesford Treatment Works—Completed February, 1970.

12"/9" dia. Main Crich Reservoir to Wolds Reservoir—Completed June, 1970.

Installation of Sodium Carbonate Softening Plant at Little Eaton Pumping Station—Completed September, 1970.

9" dia. Main Bessalone—Heage Firs—Completed December, 1970.

12" dia. Main Radbourn Lane to Mickleover—Completed October, 1970.

12"/9" dia. Main Crich Lane—Farnah Green—Commenced October, 1970.

9" dia. Main Ladyflatte — Bremfield Lane — Commenced September, 1970.

Washgreen Service Reservoir—Commenced October, 1970.

Installing Screening Plant, Homesford Treatment Works—Commenced November, 1970.

Crich Booster Station—Completed November, 1970.

12"/9" dia. Main Holloway to Homesford—Completed January, 1970.

North Derbyshire Water Board (*Report kindly submitted by Mr. C. H. Crombie, M.I.C.E., M.I.W.E., Engineer and Manager*):

	<i>No. of Houses</i>	<i>Estimated Population Involved</i>
No. of houses connected to mains ..	101,727	316,000
No. of houses supplied from standpipes or mains	15	44
No. of houses not supplied from stand- pipes or mains	1,328	3,980
No. of connections made during year:-		
(a) existing houses	16	
(b) new houses	1,451	
(c) other premises	114	

Major work carried out included the following:-

Manton water supply scheme

Lowtown Water Treatment and Softening Plant completed and operational—May, 1970. Plant capable of treating up to 3 m.g.d.

South Derbyshire Water Board bulk supply scheme

First phase completed December, 1970, augmenting supplies via Linacre Reservoirs to Chesterfield. Second phase commenced

May, 1970, enabling supplies in North East Area to be augmented from same source.

Western Area scheme

Scheme of trunk mains, pumping stations and service reservoirs commenced May, 1970 to rationalise and improve supplies in the Board's Western Area.

Sewerage and sewage disposal

Rural Water Supplies and Sewerage Acts, 1944 to 1965.

Four schemes received approval during the year, as follows:-

<i>Authority submitting</i>	<i>Scheme</i>	<i>Estimated Cost</i>
Belper R.D.C.	Openwoodgate extension	£700
do.	Hazelwood extension	£998
Repton R.D.C.	Hatton	£155,100
S.E. Derbyshire R.D.C.	Ockbrook & Borrowash extension	£4,250

Information is given below of the position in the County with regard to sewerage and sewage disposal. Boroughs and Urban Districts have 99.1% of their houses connected to sewers, whilst Rural Districts have a corresponding figure of 91.4%.

	<i>Municipal Boroughs and Urban Districts</i>		<i>Rural Districts</i>	
		<i>Estimated Popu- lation Involved</i>		<i>Estimated Popu- lation Involved</i>
No. of Houses:				
(a) Connected to sewers ..	136,347	386,266	86,081	258,983
(b) Not connected to sewers ..	1,246	3,426	9,210	22,700
No. of connections made during year:				
(i) existing houses	30	—	97	—
(ii) new houses	2,066	—	1,064	—
(iii) other premises	59	—	14	—
No. of conversions of other closets to W.C.s	25	—	116	—

Some notes follow of improvements made, or in progress, in the various districts.

Bakewell U.D.C. Joint scheme with Bakewell R.D.C. well advanced. Completion expected early 1971.

Clay Cross U.D.C. Improved and enlarged disposal works at Danesmoor completed.

Long Eaton U.D.C. Toton disposal works extensions continued during year; completion expected September, 1971.

Matlock U.D.C. Slaley sewage scheme completed.

Ripley U.D.C. Phase I of main scheme substantially completed. Northern Sewage Works expected to be in operation in June 1971.

Swadlincote U.D.C. Phase I of sewage works extension completed.

Ashbourne R.D.C. Biggin-by-Hartington scheme completed. Osmaston, Yeldersley Scheme and Carsington and Hopton Scheme started.

Bakewell R.D.C. Work on second phase of Southern area sewerage scheme commenced.

Belper R.D.C. Schemes completed: Sewer extensions at (a) Openwoodgate; (b) Hazelwood; (c) Idridgehay; relaying of 12" diameter sewers at Main Road, Smalley. Schemes in progress: (a) extensions to Duffield sewage works; (b) Horsley flood alleviation scheme; (c) Quarndon works abandonment scheme with drainage to Derby Borough system.

Chesterfield R.D.C. Works completed: Doe Hill sewer extension; Holmewood surface water sewer; minor improvements to sewage works at Homesford, Wheeldon Mill, Wessington and Unstone; alterations made in Southern Area computing scheme; sewers diverted at Heath. Works in progress: Renishaw sewage works reconstruction; sewers being renewed at Grassmoor.

Repton R.D.C. Cauldwell scheme completed.

S.E. Derbyshire R.D.C. Following schemes completed:- Aston, Weston and Shardlow sewerage and sewage disposal extensions; Little Eaton sewage disposal extensions; Ockbrook new works, resewering in progress: Dale Abbey sewerage.

Housing

The impact of the 1969 Housing Act, particularly with reference to house improvement, is now being felt. Figures in the table below show a considerable increase in the number of improvement grants made by district councils, in total from 1,999 in 1969 to 2,728 in 1970, just over a third. This is encouraging. However, the demolition and closure of unfit houses has slowed down. The figures for 1969 totalled 1,035, whilst those for 1970 were 911. It is relevant to observe that the eradication of slum properties must be kept up at a reasonable pace if many of them are not to be with us in the 1980's. Further, that the enthusiasm to improve houses to present day standards may not be a good proposition for those people who will be living in them in fifteen years time. A quotation from the Dennington Committee Report is very relevant in this context: "The satisfactory house in a satisfactory environment must be the aim and the standards set for both must be achieved and then maintained." This was published in 1966 and the thought perhaps is more important today with the emphasis on environmental standards.

SLUM CLEARANCE

	<i>Municipal Boroughs and Urban Districts</i>	<i>Rural Districts</i>
Estimated No. of houses declared unfit, 1955-1970	8,810	8,374
Total No. of houses demolished or closed 1955 to 31/12/1970	7,373	6,257
During 1970:—		
Houses demolished:		
(a) in Clearance Areas	232	179
(b) not in Clearance Areas	208	216
Unfit houses closed	45	30
Unfit houses made fit and houses in which defects were remedied	2,142	622
Unfit houses in temporary use	45	1
Houses in Clearance Areas purchased	167	8

IMPROVEMENT GRANTS

	<i>No. approved for conversion or improvement (Housing Act 1969)</i>	<i>No. approved for improvement (Housing Act 1969) ('standard grants')</i>	<i>No. approved for special grant (Housing Act 1969)</i>
Municipal Boroughs and Urban Districts ..	405	1,372	—
Rural Districts ..	252	698	1

IMPROVEMENT AREAS

	<i>Municipal Boroughs and Urban Districts</i>	<i>Rural Districts</i>
(a) No. declared	2	—
(b) No. of houses in declared areas ..	161	—
(i) No. of improvable dwellings	126	—
(ii) No. of (i) above of tenanted improvable dwellings ..	72	—
(c) No. of houses lacking standard amenities	122	—
(d) No. of houses brought to:		
full standard	20	—
reduced standard	—	—

NEW HOUSING

	<i>No. of new dwellings completed during 1970</i>	
	<i>by local authorities</i>	<i>by private enterprise</i>
Municipal Boroughs & Urban Districts ..	603	1,460
Rural Districts	197	875

Swimming baths

The following Table shows the number of swimming baths in the County, and the results of the investigation on the samples taken.

	<i>No. of Baths</i>		<i>Samples taken</i>	
	<i>Public</i>	<i>Private (Open to Public)</i>	<i>Satisfactory</i>	<i>Unsatisfactory</i>
Municipal Boroughs and Urban Districts	14	5	207	11
Rural Districts	1	6	41	17

Refuse collection and disposal

Progress continues to be made in refuse collection systems. As mentioned in the last Annual Report quite a number of authorities in the County are either using or testing sack schemes. From information now provided, it appears that so far six councils have opted for polythene bin liners and one for plastic bins, and four for paper sacks. There is also an extension of bulk container collection. Disposal of refuse is not really progressing in the same way. Apart from the new composting scheme in Chesterfield R.D.C. little has been achieved in the way of improved disposal: tipping remains the major system.

The table below gives details of present methods:-

	<i>Collection</i>		<i>Disposal</i>		
	<i>Direct Labour</i>	<i>Contract</i>	<i>No. of Controlled Tips</i>	<i>No. of Uncontrolled Tips</i>	<i>Destructor Works</i>
Municipal Boroughs and Urban Districts	20	—	23	—	1
Rural Districts	9	—	20	1	—

Meat inspection

From information which has been provided by the District Councils, it appears the following animals were killed and inspected during the year:-

	<i>Municipal Boroughs and Urban Districts</i>	<i>Rural Districts</i>
	<i>Number killed and Inspected</i>	<i>Number killed and Inspected</i>
Cattle, excluding cows ..	27,061	12,269
Cows	26,448	7,148
Calves	283	244
Sheep and Lambs	72,252	42,354
Pigs	65,469	20,595
Horses	—	—

Moveable dwellings

Discussion went on during 1970 about the establishment of a caravan site for gypsies and other travellers in the north east of the County. Two sites were being considered in Chesterfield R.D. and by the end of the year a site at Grassmoor, on disused railway land, was considered the one to be most suitable. The provision of such sites is going to be a long and contentious matter but the constant complaints about roadside "travellers" will only be resolved if such provision is made. The table below gives figures for caravan sites in the County.

	<i>Licensed Caravan Sites</i>				<i>Individual Licensed Vans</i>
	<i>Holiday</i>		<i>Residential</i>		
	<i>Sites</i>	<i>Vans</i>	<i>Sites</i>	<i>Vans</i>	
Municipal Boroughs .. and Urban Districts ..	10	198	26	385	28
Rural Districts	77	777	97	585	71

Offices, Shops and Railway Premises Act, 1963.

The figures below indicate the work that has been done during the year. These and other statistics have to be rendered annually to the Department of Employment and Productivity by local authorities:-

REGISTRATIONS AND GENERAL INSPECTIONS

Class of premises	No. of premises registered during the year		Total No. of registered premises at end of year		No. of registered premises receiving a general inspection during the year	
	M.Bs & U.Ds	R.Ds	M.Bs & U.Ds	R.Ds	M.Bs & U.Ds	R.Ds
Offices	38	14	897	189	247	96
Retail Shops	75	30	2,264	827	819	617
Wholesale shops, and warehouses	7	5	96	37	22	15
Catering establishments open to the public, canteens	16	7	318	201	140	126
Fuel storage depots ..	2	—	29	18	9	8
Totals ..	138	56	3,604	1,272	1,237	862

PERSONS EMPLOYED IN REGISTERED PREMISES

Class of workplace	No. of persons employed	
	M.Bs & U.Ds.	R.Ds
Offices	10,155	1,082
Retail shops	10,254	2,663
Wholesale departments, warehouses ..	1,121	294
Catering establishments open to the public ..	2,058	1,297
Canteens	131	54
Fuel storage depots	159	71
Total	23,878	5,461
Total Males	9,674	2,097
Total Females	14,204	3,364

Prevention of atmospheric pollution

County district councils have considerable powers under the provisions of the Clean Air Acts 1956 and 1968 to control atmospheric pollution. Such provision can be broadly divided into two parts viz:-

- (a) general regulatory powers;
- (b) powers to establish smoke control areas.

Sections of the 1968 Act made operative in 1969 facilitated the control of grit and dust emissions from furnaces, extended the provisions in relation to the approval of the height of new chimneys and enabled action to be taken against the sale of bituminous coal in smoke control areas.

Readings of deposit gauges, etc., in some of the districts are given below. In addition to those shown, some other Councils are operating gauges but figures in respect of them have not been made available. In order to make some of the figures more understandable the following extract from a report submitted by Dr. Nutten, the Medical Officer of Health for Buxton Borough may be found useful:-

"Professor P. J. Lawther recently Director of the Medical Research Council, Air Pollution Unit, said that in his view and on the present state of knowledge, smoke in any concentration was undesirable and could well constitute a hazard to health; it should be eliminated as far as was economically possible. There was no evidence, however, that reasonably low concentrations of sulphur dioxide were of themselves harmful, and if the concentrations of smoke were low, he would be inclined to accept peak concentrations of up to 1,000 microgrammes per cubic metre of sulphur dioxide, but would consider anything in excess of this to be potentially harmful, at least to some people. This would mean aiming at a limit of some 100 to 150 microgrammes per cubic metre for the average winter concentrations."

Station	Readings			
	Smoke		Sulphur Dioxide	
	Daily average over each month			
	Highest	Lowest	Highest	Lowest
Chesterfield Borough:	Microgrammes		per cu. Metre	
Town Hall	454	8	368	33
Electricity Works	629	1	393	30
Newbold Green School	371	1	272	24
	Milligrammes		per sq. metre	
St. John's Road Depot	153	51	2.33	0.5
Sewage Works	96	38	2.22	0.68
Bolsover U.D.C. :				
Hall Farm, Woodhouse Lane	134.2	63.2	—	—
Moor Lane	125.9	3.2	2.23	0.60
Cundy Road	—	—	2.01	0.52
Staveley U.D.C. :				
Staveley Works Canteen	220.7	75.7	—	—
King George Playing Fields	87.6	43.4	2.08	0.73

The following is a summary of information supplied by some local authorities relating to atmospheric pollution:-

Chesterfield Borough. Five smoke control areas in operation covering 1,400 acres and involving 6,000 premises.

Glossop Borough. Three smoke control areas in operation covering 710 acres and involving 829 premises.

Ilkeston Borough. No. 3 Smoke Control area made operative on 1st October, 1970.

Bolsover U.D.C. One smoke control area in operation covering 86 acres and involving 230 houses.

Heanor U.D.C. Nos. 1 and 3 Orders again deferred until April 1971.

Ripley U.D.C. No. 2 Order confirmed, to become operative in 1971.

Belper R.D.C. No. 3 Order confirmed, to become operative in 1971. No. 2 Order operative date deferred from 1st October, 1970 to 1st April, 1971.

Chesterfield R.D.C. Declaration of smoke control orders continuing; current cost to Council now approximately £30,000 per annum.

MEDICAL AND DENTAL STAFF OF THE COUNTY HEALTH DEPARTMENT

(at 31st December 1970)

COUNTY MEDICAL OFFICER OF HEALTH

A. H. SNAITH, M.D., F.R.C.Path., D.P.H.

DEPUTY COUNTY MEDICAL OFFICER OF HEALTH

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MEDICAL OFFICER FOR CHESTERFIELD BOROUGH

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*C. G. WOOLGROVE, M.B., Ch.B., D.P.H.

*Also District Medical Officer of Health

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